

## **MDS Alert**

## Incontinence: Know The Types Of Urinary Incontinence For Optimal Care Planning

Functional incontinence may relate to cognitive and communication problems.

You know that solving a problem is often difficult if you don't know the cause. This is certainly true when it comes to a resident's bladder incontinence problems. Don't let a lack of knowledge negatively impact your bladder/bowel quality measure score.

Urinary incontinence is the involuntary loss or leakage of urine. There are many different potential causes of urinary incontinence, and a resident may experience more than one type at a time, according to a recent training by **Maureen Valvo, BSN, RN, RAC-CT**, senior quality improvement specialist with the Quality Improvement Organization (QIO) **IPRO**, part of the **Atlantic Quality Innovation Network**.

If staff are unsure about the cause of a resident's bladder incontinence, recording a seven-day bladder diary may help to narrow down the potential sources, Valvo suggested. Also, many of the underlying causes of urinary incontinence are potentially reversible, especially among residents with new or recent onset of incontinence episodes.

Some of the most common types of urinary incontinence include:

- **Stress incontinence**  $\square$  occurs with coughing, sneezing, laughing, lifting, standing from a sitting position, climbing stairs, etc.
- **Urge incontinence**  $\square$  occurs due to an overactive or spastic bladder and involves a sudden, strong urge to expel moderate to large amounts of urine before the bladder is full.
- **Mixed incontinence**  $\square$  is a combination of stress and urge incontinence.
- **Overflow incontinence** [] is due to a blocked urethra or weak bladder muscles, causing leakage of small amounts of urine when the bladder has reached its maximum capacity and has become distended.
- Transient temporary/occasional incontinence [] is related to a potentially improvable or reversible cause.
- **Functional incontinence** [] occurs when the resident can't get to the toilet in time due to physical disability, external obstacles, problems thinking or communicating, or availability of staff assistance.