

FOR CAREGIVERS ON ALZHEIMER'S TOILETING

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- 1. Pay attention to their toileting routine and stick to that routine if possible. The most common routine is first thing in morning when they wake up. After each meal and at bedtime. Mealtimes vary greatly in families, but toileting every 2 hours can help prevent accidents.
- Recognize different liquids can increase urination, such as alcohol and caffeine drinks. Many fruits have a high-water content and will cause them to need to go sooner.
- 3. Acidic fruits can make it harder to control the bladder. This includes oranges, lemons, and pineapple. Keep this in mind when they are eating this fruit.
- **4.** Tomatoes are also very acidic. Foods with tomato products in them may irritate the bladder.





- 5. Many processed foods have additives which can irritate the bladder. Try to encourage a diet with whole foods such as fruits, vegetables, and grains.
- 6. Encourage fluids early in the day and cut down later in the evening to help prevent the need to toilet during the night. Many falls have happened during the night due to the need to go to the bathroom.
- 7. Make sure they are getting enough liquids and know the signs of dehydration. Dark urine, dry skin, dry mouth, dizziness, lightheaded, weak, tired, constipation, and no energy are the most common signs.
- 8. Constipation is difficulty emptying the bowels and it can be a serious toileting problem. Many patients have ended up in the hospital due to an impaction or a bowel obstruction. Constipation issues need to be reviewed with your doctor; he may need to develop a bowel protocol with you. A bowel protocol is a plan using certain foods or medicines to prevent constipation. It is very important that you track their bowel habits to prevent these medical issues.
- 9. Urinary tract infection (UTI) can wreak havoc on someone with dementia. It can cause increased confusion. The signs of a UTI are; strong urine odor, cloudy urine, burning sensation, increased frequency of urinating, and a strong persistent urge to void. Often the first sign of a urinary tract infection is the increased confusion. As a nurse it is always the first thing I check for new or worsening confusion in an elderly patient. A UTI is caused by bacteria entering the urethra, often these bacteria are from their stool which gets into the urinary opening.
- 10. Steps to preventing a UTI include; drinking plenty of fluids, good private area hygiene, wiping/cleaning from front to back in women, and drinking cranberry juice.



- 11. Cleaning up accidents can be very difficult for both of you especially in the early/middle stages. Remember to maintain their dignity at all times. Never shame them, it is the disease and not the person. I highly recommend you wear disposable gloves when cleaning up an incontinent episode.
- 12. Maintain their skin's integrity. When someone becomes incontinent and urine sits on their skin, it can cause the skin to breakdown. This is painful and can lead to open wounds easy. Clean their private area well with soap and water or the disposable cloths. There are several types of barrier creams on the market to keep the moisture from breaking down the skin. If your loved one is incontinent and wearing pads/pullups/briefs please use barrier cream a couple of times a day or after every incontinent episode.
- 13. Know what products are available. Here is the link to my toileting blog which goes into detail about the different types of products.

 https://alzheimersinyourhome.com/toileting/
- 14. Incontinence in a bed bound person can be difficult. There are bed pads that can be placed under them to help prevent any urine or stool on the bed. The easiest way to change an adult diaper in bed is to roll them from side to side. Undo the old diaper, fold it over on itself to keep the waste inside, cleanse the area, slide the new diaper under as far as possible, go the other side of the bed, roll them back to the other side, pull the old diaper out, cleanse the area from this side, pull the new one through, roll them on their back, and tape both sides.

