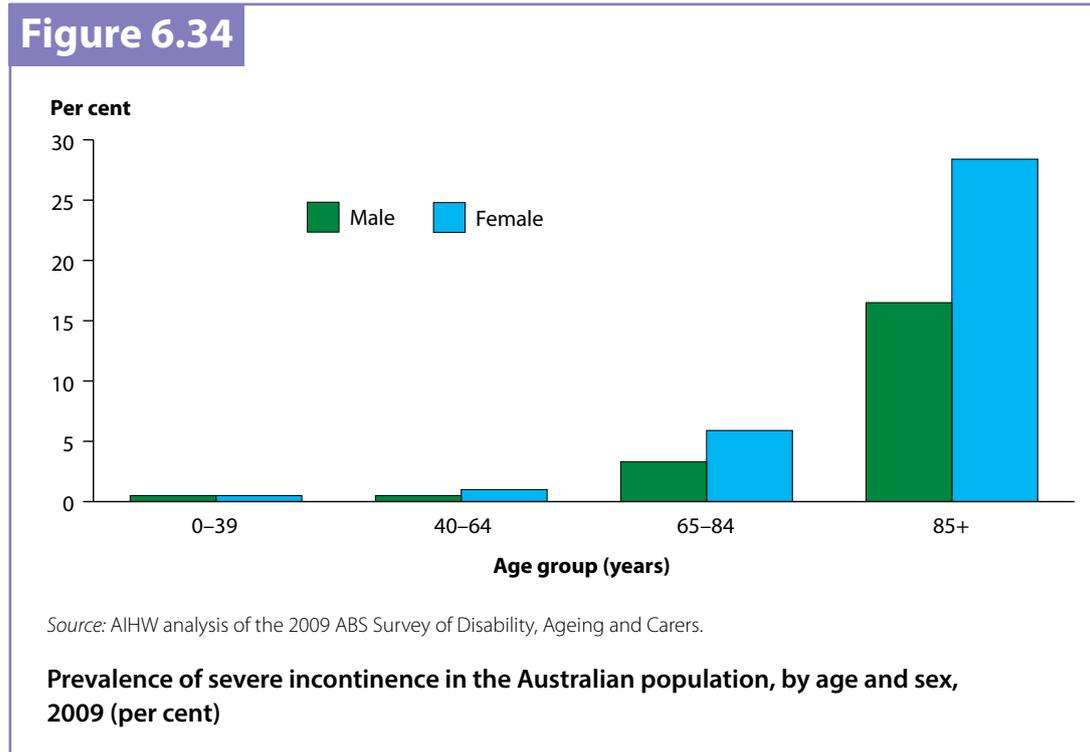


6.12 Incontinence

Many people in Australia experience some level of incontinence—the involuntary leakage of urine or fecal matter. Some people experience severe incontinence, meaning they always or sometimes need assistance with bladder or bowel control and/or use continence aids. Severe incontinence affects people of all ages, but is more common among older people. It can have profound consequences on the wellbeing of people with the condition as well as their carers.

Who does it affect?

- In 2009, 1.5% of the Australian population (or 316,500 people) experienced severe incontinence (AIHW 2013).
- Severe incontinence was more common among females (2%) than males (1%).
- People aged 65 and older were 12 times more likely to experience severe incontinence than people aged under 65 (7% versus less than 1%). About 1 in 4 people aged 85 or older (24%) experienced severe incontinence (Figure 6.34).
- About 72,900 primary carers helped with managing someone else's incontinence—4 in 5 were female (81%) and nearly 3 in 4 (73%) spent 40 hours or more per week caring.



What risk factors are associated with incontinence?

The most important factors found to be associated with an increased risk of incontinence include being older, being female and past and current pregnancy (particularly the number of vaginal deliveries). Other factors include:

- prostate problems (such as prostate disease, cancer and surgery)
- neurological disorders (such as stroke, Parkinson disease, multiple sclerosis and spinal cord injuries)
- cognitive impairment (including dementia)
- type 2 diabetes mellitus
- obesity.

How are people affected by incontinence?

Many people with incontinence have other health conditions and report other problems for themselves and their carers, including not being able to participate in work or social activities. However, it is hard to determine the extent to which these problems are caused by severe incontinence, or by accompanying limitations and health issues.

- 91% of people with severe incontinence had a severe or profound core activity limitation, indicating they had high-care needs with self-care, mobility or communication.
- People aged 15 or older with severe incontinence were twice as likely to report poor general health as people without severe incontinence (22% versus 10%).
- Just over half (52%) of people with severe incontinence could not go out as often as they would like—two-thirds (68%) said this was because of their disability or condition.
- Primary carers of people with severe incontinence were more likely than other primary carers to report strained relationships with those they care for, to need more respite care, and to report lower labour force participation. This is likely to be due, not just to the tasks involved in managing the effects of incontinence itself but also because most people with severe incontinence (over 90%) also have other limitations that require high levels of care.

How much is spent on incontinence?

- In 2008–09, an estimated \$1.6 billion was spent on incontinence. The largest share was spent on residential aged care (\$1.3 billion), followed by hospitals (\$145.5 million), the Stoma Appliance Scheme (\$67.6 million) and the Continence Aids Payment Scheme (\$31.6 million).

What is missing from the picture?

Estimates of prevalence and severity of incontinence across studies vary: partly because of differences in definitions and identification, partly because of variations in measurement of incontinence and partly because of the variation in the populations studied. The AIHW has suggested a set of standard questions for collecting information on incontinence in an effort to improve accuracy and comparability of data (see AIHW 2013).

Current research about incontinence in specific populations, such as Aboriginal and Torres Strait Islander peoples, culturally and linguistically diverse people or the sex and gender diverse population, is limited. While some groups have higher risk factors for incontinence, the extent to which this translates to higher occurrence is unknown.

How risk factors for incontinence lead to the development of the condition remains largely unexplained. Understanding these mechanisms may help reduce the number of people who experience incontinence and also help with the treatment of symptoms.

Where do I go for more information?

More information on incontinence in Australia is available in the AIHW reports [Incontinence in Australia](#) and [Incontinence in Australia: prevalence, experience and cost](#).

Information about support for people with incontinence and their carers can be found on the Department of Health website or the Continence Foundation of Australia website.

Reference:

AIHW (Australian Institute of Health and Welfare) 2013. Incontinence in Australia. Cat. no. DIS 61. Canberra: AIHW.