



Incontinence Care

失禁护理

What is continence

什么是控制排泄能力？

Continence is simply the body's ability to control when and where we go to the toilet. It is a complex process, it needs our muscle, nerve and our brain to all be working together in a perfect sync. 排泄控制指的正是人体控制排便时间和地点的能力。这是一个复杂的过程，需要肌肉、神经和大脑完美协调地协同工作。

What is incontinence

什么是失禁？

Incontinence is the involuntary loss of urine and stool. 失禁是指尿液和粪便的非自愿性排出。

Health Statistics 健康统计数据

It is very common that 1 in 4 Australians aged over 15 years old can suffer from incontinence issues. 1 in 3 women who ever had a baby can have incontinence issues. 每4名15岁以上的澳大利亚人中，就有1人可能患有尿失禁问题，这种情况非常普遍。每3名曾生育过的女性中，就有1人可能出现尿失禁问题。

If you have poor bladder control, you might like to have symptoms: 如果您有膀胱控制力差的情况，可能会出现以下症状：

- Rushing to the toilet 急着去厕所
- Accidental leakage 不自主漏尿
- Going to the toilet often during the day 白天频繁上厕所
- Waking up to go to the toilet more than once at night 夜间因上厕所而醒来超过一次

Types of incontinence 失禁的类型

1. Stress incontinence 压力性尿失禁

It is leaking during physical activity e.g. laughing, coughing, sneezing, lifting heavy stuff and exercising, the common reason for this type of incontinence is weak pelvic floor muscles. It is common in women who had childbirth and menopause, men who had prostate cancer surgery. 在进行身体活动时(例如大笑、咳嗽、打喷嚏)



嚏、搬运重物 and 运动) 会出现漏尿, 这种尿失禁的常见原因是盆底肌肉无力。这种情况常见于分娩后的女性、绝经期的女性, 以及接受过前列腺癌手术的男性。

2. Urge incontinence 急迫性尿失禁

Sudden and strong need to pass urine. Common triggers include hearing running water, drinking a small amount of water, touching cold water, or even the moment of putting a key into the front door. It is very common for clients with diabetes, stroke, Parkinson's disease, or Urinary Tract Infections (UTIs). Clients with nocturia symptoms are the type of the urge incontinence issues. 突然产生强烈的排尿欲望。常见的诱因包括听到流水声、喝少量水、接触冷水, 甚至是在将钥匙插入前门锁的那一刻。这种情况在糖尿病、中风、帕金森病或尿路感染(UTIs)客户中非常常见。有夜尿症状的客户通常属于急迫性尿失禁类型。

3. Overflow incontinence 溢出性尿失禁

This type of incontinence refers to clients being unable to fully empty their bladder. Common reasons include urethral obstruction (e.g., enlarged prostate) or bladder nerve damage (unable to sense that the bladder is full). It is common for men with an enlarged prostate, individuals with severe constipation. 此类尿失禁是指患者无法将膀胱完全排空。常见原因包括尿道梗阻(例如前列腺增生)或膀胱神经损伤(无法感知膀胱充盈)。前列腺增生的男性和患有严重便秘的人群中常见此类情况。

4. Functional incontinence 功能性尿失禁

The client's urinary system may be physically normal, but physical, cognitive, or environmental barriers prevent them from reaching the toilet in time. Common triggers include mobility issues (walking too slowly), cognitive impairment (forgetting where the toilet is), or environmental obstacles (struggling with difficult clothing fasteners). It is very common for clients with dementia, severe arthritis, or visual impairments. 客户的泌尿系统可能在生理上并无异常, 但身体、认知或环境方面的障碍导致其无法及时到达厕所。常见的诱因包括行动不便(行走过慢)、认知障碍(忘记厕所的位置)或环境障碍(难以解开复杂的衣物扣件)。这种情况在患有痴呆症、严重关节炎或视力障碍的客户中非常常见。

What are common risk factors or triggers causing incontinence? 导致尿失禁的常见风险因素或诱因有哪些?

1. Mobility & Dexterity Risk 活动能力与灵巧度风险

- **Fall risk:** client had a fall when urging to the toilet. 跌倒风险: 客户在急需如厕时会发生跌倒。
- **Access issue:** difficulty walking to the toilet independently or finding it hard to sit on the toilet due to the toilet seat being too low. 如厕便利性问题: 难以独立步行至卫生间, 或因马桶座圈过低而难以坐下。
- **Dexterity:** unable to unzip his pants independently. 灵巧度: 无法独立解开裤链。



2. Cognition and Communication Risk 认知与沟通风险

- **Dementia:** clients lose the ability to express their needs to use the toilet or are unable to recognise the urge to go or may find it difficult to find the toilet. 痴呆症: 客户丧失表达如厕需求的能力, 或无法识别如厕冲动, 或难以找到厕所。

3. Skin Integrity Risks 皮肤完整性风险

- **Incontinence-Associated Dermatitis (IAD)/ Existing Pressure Injuries** worsens Incontinence by creating pain, increasing infection risks, and discouraging the client from using the toilet. 失禁相关性皮炎(IAD)/ 现有压疮会因引发疼痛、增加感染风险及阻碍患者如厕而导致失禁恶化。

4. Nutrition & Other Clinical Risks 营养及其他临床风险

- **Urinary Tract Infection (UTI):** can easily result in Urge Incontinence. 尿路感染(UTI): 极易导致急迫性尿失禁。
- **Constipation:** result in Faecal Incontinence (Overflow Incontinence) - Faecal Impaction. 便秘: 导致粪便失禁(溢出性失禁)——粪便嵌塞。

5. Medication 药物

- Some drugs have side effects (diuretics) that can increase urine production or (sedatives) affect muscle control. 某些药物具有副作用(如利尿剂)会增加尿液生成, 或(如镇静剂)影响肌肉控制。

6. Age-Related Changes in the Body 与年龄相关的身体变化

- With age getting older, it is easy to have weakened pelvic floor muscles and sphincter muscles. 随着年龄增长, 盆底肌和括约肌容易变得虚弱。

Incontinence-Associated Dermatitis 失禁相关性皮炎

- It is a type of Moisture-Associated Skin Damage (MASD) 这是一种与湿气相关的皮肤损伤(MASD)
- **Irritant contact dermatitis caused by prolonged exposure of the skin to urine and/or faeces.** This exposure irritates the skin, leading to inflammation, redness, pain, skin breakdown or open wounds. 由皮肤长期接触尿液和/或粪便引起的刺激性接触性皮炎。这种接触会刺激皮肤, 导致炎症、红肿、疼痛、皮肤破损或伤口。
- Urine (contains water, moisture) can overhydrate the skin (process names Maceration) that make skin more fragile and easily damaged. **Urine and faeces (contains enzymes and bacteria) can alter skin PH from acidic to alkaline,** this change weakens the skin, making it vulnerable to friction, irritation and infection. 尿液(含水、湿气)会导致皮肤过度水化(该过程称为浸渍), 使皮肤变得脆弱且易受损。尿液和粪便(含酶和细菌)会将皮肤的pH值从酸性转变为碱性, 这种变化会削弱皮肤, 使其容易受到摩擦、刺激和感染。

Where are Incontinence-Associated Dermatitis located? 失禁相关皮炎通常出现在哪些部位?

Areas exposed to urine and/or faeces, such as
接触尿液的部位和/或表面, 例如:



- Perineum and perigenital region 会阴部及外阴周围区域
- Buttocks and gluteal fold 臀部及臀沟
- Inner thighs 大腿内侧
- Lower back and lower abdomen 下背部及下腹部
- Skin folds 皮肤褶皱处

Symptoms of IAD 失禁相关皮炎的症状

- Pain, burning, itchy and tingling sensation 疼痛、灼热感、瘙痒和刺痛感

Shape/edges 形状/边缘

- Often occurs over a large area, with diffuse, poorly defined, irregular and sometimes symmetrical edges. 常发生于大面积区域, 边界弥漫、不清晰、不规则, 有时呈对称分布。

Presentation/depth 表现形式/深度

- Intact skin with erythema (blanchable or non-blanchable), with or without superficial or partial-thickness skin loss 完整皮肤出现红斑(可压白或不可压白), 伴有或不伴有表浅或部分厚度皮肤缺损

Injury type 损伤类型

- A top-down injury, starting at the surface of the skin and moving inward 自上而下的损伤, 始于皮肤表面并向内发展

1A: Persistent redness WITHOUT clinical signs of infection



1B: Persistent redness WITH clinical signs of infection



2A: Skin loss WITHOUT clinical signs of infection



2B: Skin loss WITH clinical signs of infection

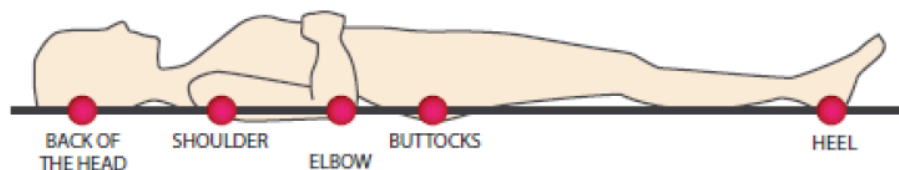


Difference between IAD and PI 失禁相关性皮炎和压力性褥疮的区别

IAD occurs in areas exposed to urine and/or faeces, while pressure injuries occur over bony prominences like back of head, shoulder, elbow, buttocks and heels. 失禁相关性皮炎发生在接触尿液和/或粪便的区域, 而压疮则发生在头后部、肩部、肘部、臀部和脚跟等骨突处。



Pressure points - lying position



What happens when continence care falls short? 当失禁护理不到位时会发生什么？

1. It has a dramatic impact on physical consequences. Being in contact with moisture for too long can lead to very painful skin breakdown and infections. Also, it increases the risk of developing pressure injuries. It can also develop recurrent UTIs, sometimes clients were trying to avoid accidents, the client might start drinking less, which can lead to dehydration. 这会对身体造成严重影响。长时间接触湿气会导致非常疼痛的皮肤破损和感染，还会增加压疮的风险。此外，还可能引发反复的尿路感染；有时，为了避免意外，客户可能会减少饮水量，从而导致脱水。

2. It can lead to huge loss of dignity and self-esteem. Clients can feel embarrassed, so they might start to pull away from friends or activities that they used to love, this can also lead to anxiety, depression and this awful feeling of losing their independence. 这会导致尊严和自尊心的严重受损。客户可能感到尴尬，从而开始疏远朋友或放弃曾经热爱的活动，这也会引发焦虑、抑郁，以及失去独立性的那种糟糕感受。

Strategies for Continence Care-Skin Health Care 失禁护理策略——皮肤健康护理

Skin Assessment and Timely Intervention 皮肤评估与及时干预

For clients with incontinence, **daily skin inspections** should be part of routine care, especially: 对于有失禁问题的客户，每日皮肤检查应作为常规护理的一部分，特别是在以下情况下：

- During toileting and pad changes 如厕及更换护垫时
- After any incontinence episode 每次失禁发生后
- When providing hygiene or continence care 进行个人卫生或失禁护理时

Regular inspection helps detect early signs of IAD before significant skin damage occurs. It is important to ensure clients' privacy and dignity should always be protected and respected during skin care e.g. close the door and pull the curtains. 定期检查有助于在皮肤受到严重损伤前发现失禁相关性皮炎 (IAD) 的早期征兆。在进行皮肤护理时，务必确保客户的隐私和尊严得到保护和尊重，例如关上门并拉上窗帘。



Report to supervisor or manager in charge if you have identified the following and document skin condition: 若发现以下情况, 请向主管或负责人报告并记录皮肤状况:

- Redness, rash or dry skin 皮肤发红、皮疹或干燥
- Changes in skin texture or softness (particularly important for people with darker skin tones) 皮肤质地或柔软度的变化(对于肤色较深的人群尤为重要)
- Maceration, erosion and oedema 浸渍、糜烂和水肿
- Blisters, cracking or broken skin 水疱、裂纹或皮肤破损
- Signs of fungal or bacterial infection (e.g. odour, discharge) 真菌或细菌感染的迹象(例如异味、分泌物)

Strategies for Continence Care-Skin Care Steps

Cleanse, Protect, Restore and Monitor Guidelines 清洁、防护、修复与监测指南

- **Gentle Cleansing:** Use soap-free PH adjusted cleanser, 'no-rinse' wipes (Molicare Skin Cleansing Foam) or '3-in-1' wipes (cleanser, moisturiser, barrier function)after each episode of incontinence 温和清洁:每次失禁后,使用无皂、pH值调节的洁面产品、“免冲洗”湿巾(如Molicare皮肤清洁泡沫)或“三合一”湿巾(兼具清洁、保湿及屏障功能)
- **Moisture Control:** Avoid-rubbing- pat dry skin 湿气控制:避免揉搓,轻拍皮肤至干
- **Barrier Product:** Apply a skin barrier product according to manufacturer's instructions 屏障产品:按照制造商说明涂抹皮肤屏障产品
- ❖ redness and skin intact: Sudocrem or 3M Cavilon Durable Barrier Cream 皮肤发红且完整:Sudocrem 或 3M Cavilon 持久屏障霜
- ❖ Persistent redness without signs of infection: 3M Cavilon Barrier Film/No Sting Spray 持续发红但无感染迹象:3M Cavilon 屏障膜/无刺激喷雾
- **Timely Incontinent Pad Change** 及时更换失禁护垫

If the IAD associated with skin care is not improved, and you have identified symptoms including increased redness, swelling, warmth, pain, discharge, or foul odour, it is likely indicating the infection. Escalate prompt to nursing staff or medical general practitioner for further assessment and intervention e.g. prescribed medical cream 如果与皮肤护理相关的皮肤损伤(IAD)未见好转,且您已观察到包括红肿加剧、发热、疼痛、渗出物或异味等症状,这很可能表明已发生感染。请立即向护理人员或全科医生报告,以便进行进一步评估和干预,例如开具医用药膏。



Strategies for Continence Care- Other Strategies 失禁护理策略——其他策略

Lifestyle, Environmental and Functional Modifications before Using Continence Aids (absorbent pads), it is important to document them in client's Care and Support Plan 在使用失禁辅助用品(失禁护垫)之前,应先调整生活方式、环境及功能,并将这些调整记录在客户的《护理与支持计划》中

- **Safe and responsive assistance with toileting** 提供安全且及时的如厕协助
- **Using structured toileting schedules (prompted voiding)**, prompt every 2 hours to prevent urine/faecal leakage 采用结构化的如厕时间表(定时排尿),每2小时提醒一次,以防止尿液/粪便渗漏
- **Pelvic Floor Muscle Exercise/training (Kegel Exercise)** 盆底肌肉锻炼/训练(凯格尔运动)
- **Reposition:** help reduce skin exposure to urine and faeces, promote airflow to affected areas, e.g. position with a **30-degree side tilt** instead of lying flat on the back may help 体位调整:有助于减少皮肤接触尿液和粪便,促进受影响区域的空气流通,例如采取30度侧卧位而非平躺,可能有所帮助
- **Adequate nutrition and hydration:** encourage at least 1.5L fluids per day to prevent UTIs. A varied diet rich in fibers, protein and energy is important to maintain skin integrity and also prevent constipation. (avoid caffeine/alcohol, manage fluids intake for Nocturia) 充足的营养与水分摄入:鼓励每日摄入至少1.5升液体,以预防尿路感染。多样化的饮食,富含纤维、蛋白质和能量,对于维持皮肤完整性及预防便秘至关重要。(避免摄入咖啡因/酒精,针对夜尿症需控制液体摄入量)
- **Adaptive clothing:** switch from buttons and zippers to elastic waistbands 适应性服装:将纽扣和拉链换成松紧腰带
- **Accessibility:** Ensure the path to the toilet is clear, and the toilet equipped with grab rails. If the bathroom is too far, consider a bedside commode for nighttime use. 无障碍设施:确保通往卫生间的通道畅通,且卫生间配备扶手。如果浴室距离过远,可考虑在床边放置便盆以供夜间使用。



Continent aids (Absorbent product e.g. pads or pull-ups) should be selected based on client's assessments and preferences. Continent pads or pull-ups should always be the last resort to assist clients with managing their incontinence issues.
应根据客户的评估结果和个人偏好选择失禁护理用品(如吸收性产品, 例如护垫或拉拉裤)。护垫或拉拉裤应始终作为协助客户管理失禁问题的最后手段。

Continent aids include: 失禁护理用品包括:

- Waterproof bed protector 防水床垫保护套
- Continent pads 失禁护垫
- Bedside commode chair 床边便椅
- Urine bottle and bedpan 尿壶和便盆
- Uridome catheter Uridome导尿管
- Fleet Enema 通便剂
- Catheter (IDC,SPC) 导尿管 (IDC、SPC)





Documentation & Client Goals 记录与客户的目标

- Involve clients and/or their family representatives in developing a continence management plan, and also advise them to access relevant health professionals (**community continence nurse advisor, continence physio, GP, urologist, pharmacist**) to assist in developing CMP as required. 应让客户和/或其家属代表参与制定排泄管理计划, 并建议他们根据需要联系相关医疗专业人员(社区排泄护理顾问、排泄物理治疗师、全科医生、泌尿科医生、药剂师), 以协助制定排泄管理计划。
- Client's continence needs should be assessed if their continence status has changed in the past 3 months. **Clients must be asked for the feedback on the continence care they get at least once in the past 12 months.** 若客户在过去3个月内排泄状况发生变化, 应对其排泄需求进行评估。必须在过去12个月内至少一次向客户征求其对所接受排泄护理的反馈意见。



Internal and External resources 内部和外部资源

- **RN Team as a Resource Person** 注册护士团队作为资源人员
- **Continence Foundation of Australia -National Continence Helpline: 1800 33 00 66** (Free advice from Nurse Continence Specialists) 澳大利亚 continence 基金会——全国 continence 热线:1800 33 00 66(由 continence 专科护士提供免费咨询)
- **NSW Continence Nursing Services** - get a GP referral and then liaise with community health district for continence services 新南威尔士州 continence 护理服务——请先获得全科医生转诊, 然后联系社区卫生区以获取 continence 服务