

Dementia sufferers more likely to be diagnosed with urinary or fecal incontinence

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Patients with a diagnosis of dementia have approximately three times the rate of diagnosis of urinary incontinence, and more than four times the rate of fecal incontinence, compared with those without a diagnosis of dementia, according to a study in this week's issue of *PLOS Medicine* by Robert Grant (Kingston University and St. George's, University of London) and colleagues. Furthermore, patients with dementia and incontinence were more likely to receive incontinence medications and indwelling catheters than those with incontinence but without dementia, the authors state.

The authors analyzed records of patients in The Health Improvement Network (THIN) database, a database of nearly 500 UK primary care practices. They extracted data on 54,816 people aged 60 years with a diagnosis of dementia and an age-gender stratified sample of 205,795 people without a diagnosis of dementia from 2001 to 2010. The THIN database does not distinguish nursing home (care home) residents from those who live in their own homes.

Men with a diagnosis of dementia had an annual rate of first diagnosis of urinary incontinence of 42.3 (95% confidence interval, 40.9.8) per 1000, compared with 19.8 (19.4.3) per 1000 men without a dementia diagnosis. Among women, the rates of a first diagnosis of urinary incontinence were 33.5 (32.6.5) per 1000 women with a dementia diagnosis versus 18.6 (18.2.9) per 1000 women without a dementia diagnosis. Rates of a first diagnosis of fecal incontinence were 11.1 (10.4.9) per 1000 men with a dementia diagnosis versus 3.1 (2.9.3) per



1000 men without a dementia diagnosis. For women with a dementia diagnosis, 10.1 (9.6.6) per 1000 had a first diagnosis of fecal incontinence, versus 3.6 (3.5.8) per 1000 women without a dementia diagnosis. The adjusted rate ratio for first diagnosis of urinary incontinence was 3.2 (2.7.7) in men and 2.7 (2.3.2) in women, and for fecal incontinence was 6.0 (5.1.0) in men and 4.5 (3.8.2) in women.

The rate ratio of use of pharmacological treatment for urinary incontinence was 2.2 (1.4.7) for both genders, and for indwelling urinary catheters was 1.6 (1.3.9) in men and 2.3 (1.9.8) in women. Urinary catheters are known to increase the risk of urinary tract infection.

A limitation of the study was that the authors had to depend on coding of diagnoses and prescriptions in the database to determine the <u>diagnosis</u> of dementia and incontinence.

The authors state, "Incontinence is a common problem for community dwelling people with dementia. Providers and planners of services for dementia should anticipate high levels of need, including advice and support for carers managing incontinence. Some aspects of clinical management of <u>urinary incontinence</u> are different for patients with <u>dementia</u> compared with those without. Further study is required to understand the clinical reasoning of health care practitioners providing care for this population, particularly in the use of indwelling catheters, given the known risks."

More information: Grant RL, Drennan VM, Rait G, Petersen I, Iliffe S (2013) First Diagnosis and Management of Incontinence in Older People with and without Dementia in Primary Care: A Cohort Study Using The Health Improvement Network Primary Care Database. *PLoS Med* 10(8): e1001505. DOI: 10.1371/journal.pmed.1001505



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