



THE SIMON FOUNDATION
FOR CONTINENCE

fact sheet

PROMOTING CONTINENCE – CHANGING LIVES

BLADDER HEALTH AND AGING

Changes which accompany aging usually occur slowly, enabling us to compensate for and adapt to a changing body. Like gray hair and wrinkles, the changes to our bladder and kidneys do not occur overnight, but over time they can become significant.

Continence is an intricate and complicated function. Urine (produced by the kidneys) drains into the bladder. As the bladder muscle expands, signals are sent from receptors in the bladder wall to the brain. At an appropriate time, a return message from the brain instructs the bladder to contract and the sphincter muscle at the bladder base to relax, allowing urine to pass out of the body. As we age, changes occur that make bladder control more challenging.

Aging kidneys no longer concentrate urine as effectively as they once could. Thus more water is lost through voiding. At the same time, the bladder's capacity decreases and the bladder's ability to contract lessens, which often leads to residual urine in the bladder after voiding. Due to incomplete emptying, it doesn't take as long for your bladder to refill after you've been to the toilet.

All of these age related changes - kidneys which do not concentrate urine as well; a lessened capacity of the bladder to hold the increased amount of urine produced by the kidneys; and the possibility of decreased contractility leading to residual urine - all put the older person at increased risk of losing bladder control. Age does not cause urinary incontinence; but age-related changes may predispose individuals to incontinence.



is shorter in women) often becomes colonized with bacteria.

The combined effect of these changes is that increased uninhibited bladder contractions force urine into a weakened, less resistant urethra. When the contraction subsides and the bladder relaxes, bacteria are carried back into the bladder from the urethra with the flow of urine, causing an increased risk of recurrent urinary tract infections (UTI). For some women, successfully treating an overactive bladder can reduce the incidence of recurring UTIs.

It is usually changes in the prostate gland which most affects continence in men. The prostate is a doughnut shaped gland (about the size of a walnut) located just below the bladder neck. As men age it is normal for the prostate to enlarge, called benign prostatic hyperplasia, or BPH. An enlarged prostate can press on the urethra and interfere with urine flow causing symptoms such as: difficulty urinating or starting to urinate; a weak urine stream; dribbling at the end of urination; frequent urination; sudden, strong urges to urinate; and urinating several times at night (nocturia).

Nocturia, like many aging changes, affects both sexes. When young, the majority of urine production occurs during the day - this reverses with age. Swelling in the lower extremities and cardiac problems may add to the causes of frequent trips to the bathroom at night.

Lastly, older adults are more vulnerable to disease and pharmaceutical induced stressors. For instance diabetes can decrease sensation, leading to impaired contractility of

THE CENTRAL NERVOUS SYSTEM:

Bladder control is affected by changes which occur in the central nervous system (CNS) resulting in a slower response time for messages to travel to and from the brain; thus there is less warning time to realize that your bladder is full. Changes in the central nervous system can result in increased urgency and/or an overactive bladder with more uninhibited bladder contractions.

THE GENDER FACTOR:

Changes in women due to aging include: (1) the length and elasticity of the urethra (the passage from the bladder to the outside of the body), and (2) lessening of the strength of the sphincter muscle. This decline is impacted by the loss of estrogen after menopause. The urethra (which

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BLADDER HEALTH AND AGING

the bladder muscle. Parkinson's and Alzheimers are also among the impactful diseases which may lead to bladder problems.

IT IS NEVER TOO LATE TO FIGHT BACK:

Many of us color our hair or cream the wrinkles from our face, but yet give little thought to preserving bladder function. It involves thought and effort to achieve healthy bladder practices to maintain as much function as possible for as many years as possible into old age.

PRACTICE GOOD TOILETING HABITS:

It is never too late to begin practicing good toileting habits. Avoid denying the urge to urinate; this can overstretch the bladder muscle and cause your bladder to lose elasticity and tone. Another habit to break is emptying frequently "just in case" - which is detrimental to good bladder tone as it doesn't allow the bladder to stretch when filling. Voiding regularly every three to six hours will help keep your bladder healthy.

Good habits also include proper positioning when using the toilet. Your feet should rest firmly on the floor (or on a small stool) which enables proper bowel emptying. Whether emptying your bladder or bowel, take time to relax and allow the muscles to work.

DO NOT SMOKE:

The chronic cough many long-term smokers live with can contribute to stress urinary incontinence (SUI). SUI is the loss of urine when you cough, sneeze, laugh or lift due to the pressure on the bladder overriding the ability of the closure mechanism to hold in urine.

MAINTAIN AN APPROPRIATE WEIGHT:

Obesity puts a strain on your entire pelvic floor area. These are the very muscles you need to remain strong in order to support your bladder and the bladder neck.

ENHANCE YOUR MOBILITY:

Maintaining mobility is good for your aging bladder because mobility allows you to reach a bathroom quickly when necessary. Exercising for increased balance is also important. Knowing that you can depend upon good balance will allow you to feel confident if you need the bathroom during the night.

ELIMINATE BLADDER IRRITANTS:

Many people report that certain foods irritate their bladder. Consider eliminating carbonated beverages, spicy and acidic foods, caffeine, chocolate, and alcohol from your diet. Slowly add one at a time back into your diet to see if it affects your bladder control. In this manner you can tell which foods irritate your bladder.

AVOID DEHYDRATION:

Lack of fluid can result in concentrated urine which may irritate the bladder. Dehydration can also lead to constipation. It is important to drink before you become thirsty because increasing age is one of the major risk factors for dehydration. You may be dehydrated if you have: headaches; kidney stones; low energy and fatigue; dark urine; constipation; or muscle and joint soreness.

To determine if you are drinking enough check the color of your urine. Urine the color of water is good and the color of lemonade is OK; however, if your urine is the

shade of apple juice you need to drink more fluid and if it is dark like Coca Cola you may need to seek medical attention for dehydration.

HAVE AN ACCESSIBLE BATHROOM:

Be sure the bathroom you use has adequate lighting, both within the room and in the hallways; remove dangerous throw rugs; and make sure the path is clear (however, you might wish to position furniture along the way that is safe to hang on to).

MANAGE YOUR BLADDER:

If you take diuretic medications, your doctor may shift the time that you take this medication so that you do not overload your bladder with fluids at night. Also, you might elevate your legs a couple of hours each day - helping the body to eliminate fluids during the daytime. And once you learn how to avoid dehydration, avoiding fluids a few hours before bedtime will help you get a good night's rest.

IT IS NEVER TOO LATE TO IMPROVE YOUR BLADDER HEALTH:

Whether you are 45, 60, or in your 90s - focusing time and attention on this little muscle can only lead to a better behaving bladder long into old age.



The Simon Foundation is a non-for-profit educational organization dedicated to helping people with incontinence.

For a sample copy of *The Informer* and a list of Fact Sheets, send \$1.00 with a business-size self-addressed envelope to:

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