Preventing Constipation Saves Many From Bowel Incontinence

Editor’s Note: The Informer’s Fall 1987 Reader Survey reported a great deal of interest in knowing more about healthy bowel habits and preventing fecal incontinence. This brief article begins a discussion of the topic which will be more thoroughly explored in upcoming issues.

Although many older Americans have bowel problems, Julie Munro-Ashman writing in the Australian Journal on Ageing states: “There is no real evidence that age in itself results in a change of bowel habits, or that constipation is something that happens with age.” One study Dr. Munro-Ashman cited showed that 70% of the population had regular daily bowel movements, while the remaining 30% reported their normal habit to range from once a week to two or three times per day. Thus, it is important to know what is regular for you, and secondly, not to blame any changes on the aging process.

Constipation may be caused by:
1. Lack of dietary fiber,
2. Poor fluid intake,
3. Lack of exercise due to conditions such as arthritis, stroke, foot problems, or bed rest for an extended illness,
4. Side effects of some medications.

Many people need to learn to identify the foods high in fiber such as some cereals, green vegetables, fresh fruit, and wholemeal breads. For instance, bananas are a good source of fiber. You can also bake bran into bread or cakes to increase your daily intake of fiber. When enough fiber is not available through normal dietary intake, bulk forming agents such as Metamucil might be recommended by your physician. It is very important to tell your doctor about your problems in this area so that he or she can help eliminate possible medical causes.

Fiber alone, however, will not solve the problem. Adequate hydration is necessary. Many people drink less as they age. This tendency should be avoided. Eight glasses of fluid is the usual amount recommended each day. Do be sure several of these glasses are water, a liquid which contains no bladder irritants such as caffeine.

Recently, a physician shared with us a problem he and his patients were having.

Learning to be Assertive

Editor’s Note: In our recent membership survey, learning more about coping techniques rated a high place among reader preferences. The following article is condensed from the Simon Foundation’s book, Managing Incontinence: A Guide to Living With the Loss of Bladder Control, which can be purchased from the Foundation for $12.95.

Assertiveness training can reduce anxiety and depression by teaching you to stand up for legitimate rights without bullying others (aggression) or letting them bully you (passivity). Assertiveness means expressing personal rights and feelings. You are assertive when you stand up for your rights in such a way that the rights of others are not violated. Beyond merely demanding your rights in situations, an assertive person can express personal rights spontaneously, ask for clarification, talk about oneself without being self-conscious, disagree with someone openly, and say no when appropriate.

You can also be more relaxed in interpersonal situations. Some people think that assertiveness turns nice people into terrible, mean complainers or manipulators. Not true. It is your right to protect yourself when something seems unfair. You are the one who best knows your discomfort and your needs.

Several months of step-by-step work is often necessary for some individuals to learn assertiveness training. A detailed explanation is beyond the scope of this note, however a brief outline of the training is presented here with references for more comprehensive training included at the end of this article.

When learning assertiveness training, one must be aware of the legitimate rights he or she has as an adult individual. Here are a partial list of those legitimate rights taken from the Relaxation and Stress Reduction Workbook:
- You have the right, at times, to put yourself first.
- You have the right to make mistakes.
- You have the right to be the final judge of your feelings.
- You have the right to have your own opinions.
- You have the right to change your mind or decide on a different course of action.
- You have a right to protest unfair treatment.

The Simon Foundation Needs You

Long term readers of The Informer know that the Simon Foundation runs primarily on volunteer power. Unfortunately, we can’t seem to interest the U.S. Post Office, the printers, the telephone company, nor the landlord in accepting one of our volunteers in exchange for services. Therefore, we must turn to each of you, our loyal readers, for financial support.

Please tuck as much as you can in the enclosed envelope and return it to us TODAY. The power of just one dollar from EACH reader would be substantial. (See editorial.) Please give whatever you can for us to continue our work for continence.

Help us to help others. We Do CARE... Continence, Awareness, Research, & Education.
Simon Says

"THE SOLUTION STARTS WITH YOU"... Just a reminder that if you are not already familiar with this video, it is a must see for people who are struggling with the problems presented by incontinence. Long term care facilities can use the video as a community service to create public awareness. Hospitals will find it ideal for their inpatient television channels. The film is available in 16mm, ¾" tape, and ½" VHS. You can arrange to preview the film for only $15.00 prepaid, by writing The Simon Foundation Audio/Visual Resource Library, 5000 Park Street North, St. Petersburg, Florida 33709-9989, or by calling toll free at 1-800-237-4599. The purchase price of your own VHS is $89.95. Time Magazine called this film "A touching, enlightening video." You will too.

A STEP IN THE RIGHT DIRECTION... Recently, the Chicago Tribune ran a small news article which affects many Informer readers. We are reprinting it in its entirety here. Readers may want to make use of this data when new public buildings are being constructed in their communities. "A study by a Cornell University engineering student concludes that designs of public restrooms are unfair to women because they fail to account for differences between the sexes in time spent using a toilet. Instead of providing the same number of stalls for males and females, it would make more sense to provide six stalls for women to every four for men, concludes the study by Anh Tran. Working with the Washington State Department of Transportation, Tran discovered that women use restroom facilities for an average of 79 seconds and that men use them for 45 seconds. This difference means that lines often form in women's restrooms while toilets in men's facilities go unused. 'I have yet to understand why architects have never taken this difference into consideration,' said Tran, whose study apparently is the first of its kind."

NIH CONSENSUS DEVELOPMENT CONFERENCE: URINARY INCONTINENCE IN ADULTS... This meeting will be held October 3-5, 1988 in Bethesda, Maryland, and is open to the public. There is no charge for registration. Sponsored by several government agencies, the conference announcement states: "Considerable controversy exists about the proper diagnostic techniques and therapies for urinary incontinence. In recent years, the body of research on this topic has grown. This conference will review these data in an effort to reach consensus on the most appropriate ways to address urinary incontinence." The conference will bring together geriatricians, urologists, gynecologists, nurses, mental health care providers, other health professionals, and the public. You can receive a brochure describing the conference by writing: Urinary Incontinence in Adults, Barbara McChesney, Prospect Associates, Suite 500, 1801 Rockville Pike, Rockville, MD 20852. The brochure not only gives you information about the conference, but allows you to request a copy of the Consensus Statement and a videotape summarizing the conference.

A DIFFERENT KIND OF BOOKSTORE... Shopping by mail is nothing new to most of our readers. However, a nurse in Portland, Oregon realized that many people with disabilities have difficulty in shopping for the books they need. She is helping to meet their needs with the Disability Bookshop Catalog. You can receive one for $1.00 by writing Disability Bookshop Catalog, P.O. Box 129, Vancouver, Washington 98666. Expect to find over 150 titles of interest to people living with a disability.

---

One Voice:
An Editorial

Have you ever asked yourself who solves problems in our country? Although the answer to this question often is complex, it is common that when there is a profit to be made, entrepreneurs and industry solve the problem. Where no profit exists, people who are affected by the problem and humanitarians solve it.

It seems to me that incontinence follows this pattern. For example, there is money to be made by offering the public management techniques involving adult incontinence products. Entrepreneurs and industry are all rushing to build a better mousetrap to fill the need. "Capitalism" and "profit" are words I love because they help to get a lot of jobs done. Profits motivate industry to continue to solve the problem for those with incontinence who cannot be cured, or choose to manage their problem with products of various kinds.

But research into cure and treatment improvements is up to you and me. That's why the Simon Foundation needs your dollar power. I would venture an opinion that no other medical problem that affects so many people so drastically has had so little financial support from either government, private foundations, or individuals.

Change is needed. The time is now, and the people are you and me. So please put down this Informer and write us a check for as much as possible. Do not let the fact that "as much as possible" may be $1.00 stop you from donating. We receive notes from people that say: "I'm sorry this isn't more, but it's all I can send. I'm 86 years old and I've been very ill. Also I am on a fixed income."

If only they knew the power of their dollar as seen from our side! First of all it says they care, and caring, like love, packs a powerful punch. The dollar they sacrifice is put to good use, especially when added to the contributions of others. If everyone reading this page right now decided to send $1.00 we could give seed money to several scientific researchers who are searching for clues to cures.

If each of you sent $3.00, in addition to funding research, we could hire a physician or nurse to answer your questions on our toll-free 800 number. $10.00 each would help us lobby Congress for increased allocations of dollars to this cause, and Medicare reimbursement for incontinence products.

You see, TOGETHER we can do this important job. Incontinence can be cured, treated, and successfully managed. But the buck stops here with you and me, the people who have the problem because we know about the pressing need. Perhaps the following story will help you understand a little better what I am trying to communicate:

This is a story about four people named Everybody, Somebody, Anybody, and Nobody.

There was an important job to be done and Everybody was sure that Somebody would do it. Anybody could have done it, but Nobody did it.

Somebody got angry about that, because it was Everybody's job. Everybody thought Anybody could do it, but Nobody realized that Everybody wouldn't do it.

It ended up that Everybody blamed Somebody when Nobody did what Anybody could have done!

PLEASE DON'T LET CURING INCONTINENCE BE THE JOB ANYBODY COULD HAVE DONE BUT DIDN'T! Give your dollar to the Simon Foundation. Help us get the job done.
Dear Reader:

The information we receive from our readers helps us speak accurately about the needs and problems of people with incontinence. We are often called upon to answer questions from journalists and product manufacturers, and to speak at medical meetings. Please take a moment to answer the following questions and return this sheet to The Simon Foundation, P.O. Box 835, Wilmette, IL 60091.

1. At what age did you first have trouble with incontinence? ______
2. How many years have you experienced the problem? ______
3. When did you consult a doctor?
   ☐ Immediately
   ☐ Within three months
   ☐ A year later
   ☐ Two years later
   ☐ Three years later
   ☐ Over ______ years later
   ☐ I have never consulted a doctor
   ☐ about incontinence
4. The reason I didn't consult a doctor immediately (if you didn't) is:
   ☐ I hoped the problem would go away on its own
   ☐ I didn't know which doctor to ask
   ☐ I was too embarrassed to talk to a doctor about incontinence
   ☐ I couldn't afford a doctor
   ☐ I felt the leakage was small and I could manage it myself
   ☐ I was afraid of what the doctor might find wrong with me
   ☐ I didn't think incontinence could be cured or treated
   ☐ Other reasons
5. Incontinence has changed the way I live my life:
   ☐ Not at all
   ☐ Some
   ☐ Quite a bit
   ☐ Completely
6. If you feel that you have changed your life to accommodate incontinence, please check those areas affected:
   ☐ I travel ☐ same amount ☐ less ☐ have stopped completely
   ☐ I shop ☐ same amount ☐ less ☐ have stopped completely
   ☐ I attend church ☐ same amount ☐ less ☐ have stopped completely
   ☐ My sexual activity is ☐ the same ☐ less ☐ have stopped completely
   ☐ I stay home ☐ the same ☐ less ☐ I never go out anymore
   ☐ My work has been affected ☐ not at all ☐ some ☐ I quit work
   Please describe these changes to us and how they relate to your incontinence (feel free to add page)
7. Which of the following medical problems do you think would distress you more than your incontinence does?
   ☐ deafness ☐ blindness ☐ cancer ☐ diabetes
   ☐ paraplegia ☐ arthritis ☐ heart attack ☐ multiple sclerosis
8. How often do you dehydrate yourself (restrict fluids) to cope with incontinence?
   ☐ Never
   ☐ Infrequently
   ☐ I dehydrate myself ______ days per month
9. How much do you spend per year taking care of your incontinence problem?
   Medical tests $ ______  Physician visits $ ______
   Prescriptions $ ______ Incontinence products $ ______
10. How long have you been receiving Simon Foundation information? ______
11. In order to continue the work of the Foundation we need to begin charging membership dues. Please check the amount you would contribute to join:
    ☐ $15 annually  ☐ $20 annually  ☐ $25 annually
    ☐ I would like to join, but could not afford to do so at this time.
12. Please rank the following items in the order you would like to see the Federal Government become involved in incontinence.
    ☐ fund scientific research into seeking cures
    ☐ reimburse Medicare patients for incontinence products
    ☐ sponsor public education and awareness campaigns
    ☐ other ideas

If you would be willing to answer a more detailed questionnaire please fill:

name: ____________________________
street: ____________________________
city/state/zip: ______________________

Return to: Reader Survey, The Simon Foundation, P.O. Box 835, Wilmette, IL 60091

THANK YOU. Editor's Note: This issue of The Informer was underwritten by an educational grant from Kimberly-Clark Corporation, makers of Depend. The Simon Foundation does not endorse specific incontinence products or medical treatments. Inclusion in our Thank You column in no way implies endorsement.

Try Depend Absorbent Products FREE
America's leading retail brand of absorbent products for loss of bladder control — WANTS YOU TO TRY US FREE!
Select the sample you want and mail us this form.

I would like to receive: (please check one)

☐ 3 DEPEND Shields for light to moderate protection
☐ 2 DEPEND Elastic Leg Undergarments for moderate to heavy protection
☐ 2 DEPEND Fitted Briefs for heavy to complete protection

Send my FREE samples to:
Name: ____________________________
Address: ____________________________Apt# ______
City: ____________________________
State ____________________________ Zip (required)
Mail to: DEPEND® Products Free Sample Offer
P.O. Box 90273
St. Paul, MN 55190

Limit one per household. Void where prohibited. Allow 6-8 weeks for delivery.
Offer expires December 31, 1989
Letters to the Editor

Dear Informer:

Of all the incontinence products I’ve tried, none works better for me than adult cloth Edyl diapers and Lang plastic pants. In my judgment, they are the most effective, comfortable, and secure wetness protection I’ve ever used. I welcome the opinions of other adults who use products in containing and managing incontinence. Thank you for your caring and help.

Daniel L. Weigel
1084 S. Colonia Parkway
Saukville, WI 53080

Dear Mr. Weigel:

As most of your readers know, we do not endorse a particular product or treatment modality. However, we are always happy to facilitate information exchange. We hope your letter stimulates others to express their opinions and experiences.

Dear Informer:

I am 37 years old, and live aboard my sailboat in the fabulous Florida Keys. I sail, swim, snorkel, bicycle, and work and am having a great time. I have been incontinent for over 8 years, and I am in diapers and plastic pants both day and night, but I don’t let this stop me from having a great life. I would like some pens to write to. Also, many of your readers have asked where they could purchase large size waterproof pants. I will gladly share this information with them.

Mike Smith
P.O. Box 1771
Marathon, FL 33050

Dear Ms. Gartley:

Thank you for publishing my letter. I must have really struck a raw nerve. It set three people writing me letters on the same day they received the Informer. It amazed me that I was getting letters before I had even received my own copy.

Writing to you and others who have this problem has been very helpful. The letters provide an outlet for a good deal of frustration. In addition, explaining my feelings about incontinence to others helped me explain them to me. Perhaps I wasn’t as well adjusted to my problem as I thought. I hope the people who have written me have found the experience equally rewarding.

I encourage anyone living with incontinence and feeling alone to write. I say to them, “Find someone to share your fears, frustrations, and successes with. Write to the people in the Informer. They understand. Believe me it helps.”

Jeff Lersch
3252 Nottingham rd.
Ocean Springs, MS 39564

Dear Jeff:

You said it all far better than I could. When this newsletter was first published, no one wanted their name published. Now we may have to do a special edition. The power of sharing just keeps working, doesn’t it? A special congratulations to all of you.

Approach the problem of loneliness and isolation using assertiveness skills. You can consider techniques for getting out of the house as a “ladder to more productive living.” The first letters in the following six steps for assertiveness spell ladder. Use this device to recall the steps toward assertive behavior.

1. Look at your rights, what you want, what you need, and your feelings about the situation. For example, “Is it vital for me to go out and socialize with my wife in spite of my incontinence and her discomfort about a possible accident?”

2. Arrange a time and place to work on this problem. “I will ask her to discuss it after dinner Friday night, or as soon afterward as possible.”

3. Define the problem. “She seems so uncomfortable when we’ve gone out because she fears my having an accident.”

4. Describe your feelings. “I feel frustrated that she feels embarrassed. I also feel hurt that she won’t talk about the problem. Besides, I’m feeling depressed about being a prisoner in my own home.”

5. Express your request. To the wife: “I’d like to go out with you more often.”

6. Reinforce the possibility of getting what you want by stating positive consequences should the other person cooperate with you. “I have taken precautions should an accident occur. I don’t want to feel embarrassed, but staying at home all the time just isn’t good for our relationship. I can cope with this, but I want your support as well.”

If you are interested in further reading about assertiveness training:

