

Webinar Series



Bowel & Bladder Issues in MS

February 12, 2019

Presented by:

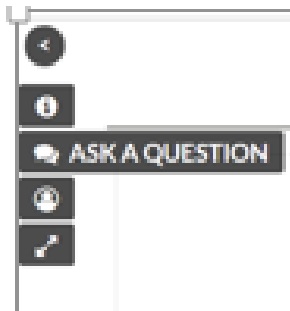


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How to Ask Questions During the Webinar:

- Type in your question in the “Ask A Question” Box
- Expand the second box in your control panel on the left side of your screen

A screenshot of a mobile application interface titled "Ask A Question". At the top left, there is a back arrow icon, an information icon, and a speech bubble icon with a plus sign. Below these is a dark grey button with white text that says "ASK A QUESTION". To the right of this button is a large, empty rectangular text input area. Below the input area, there is a smaller text input field with the placeholder text "Type your question here". Below this field is a dark grey button with white text that says "SUBMIT". At the bottom left of the screen, there is a circular arrow icon.

Ann Mullinix, OTR/L, NBC-HWC



Occupational Therapist
Centrex Rehab & Private Practice
Minneapolis, MN



Marie Namey, APRN, MSCN



Advanced Practice Nurse
Mellen Center for Multiple Sclerosis at the Cleveland Clinic
Cleveland, OH



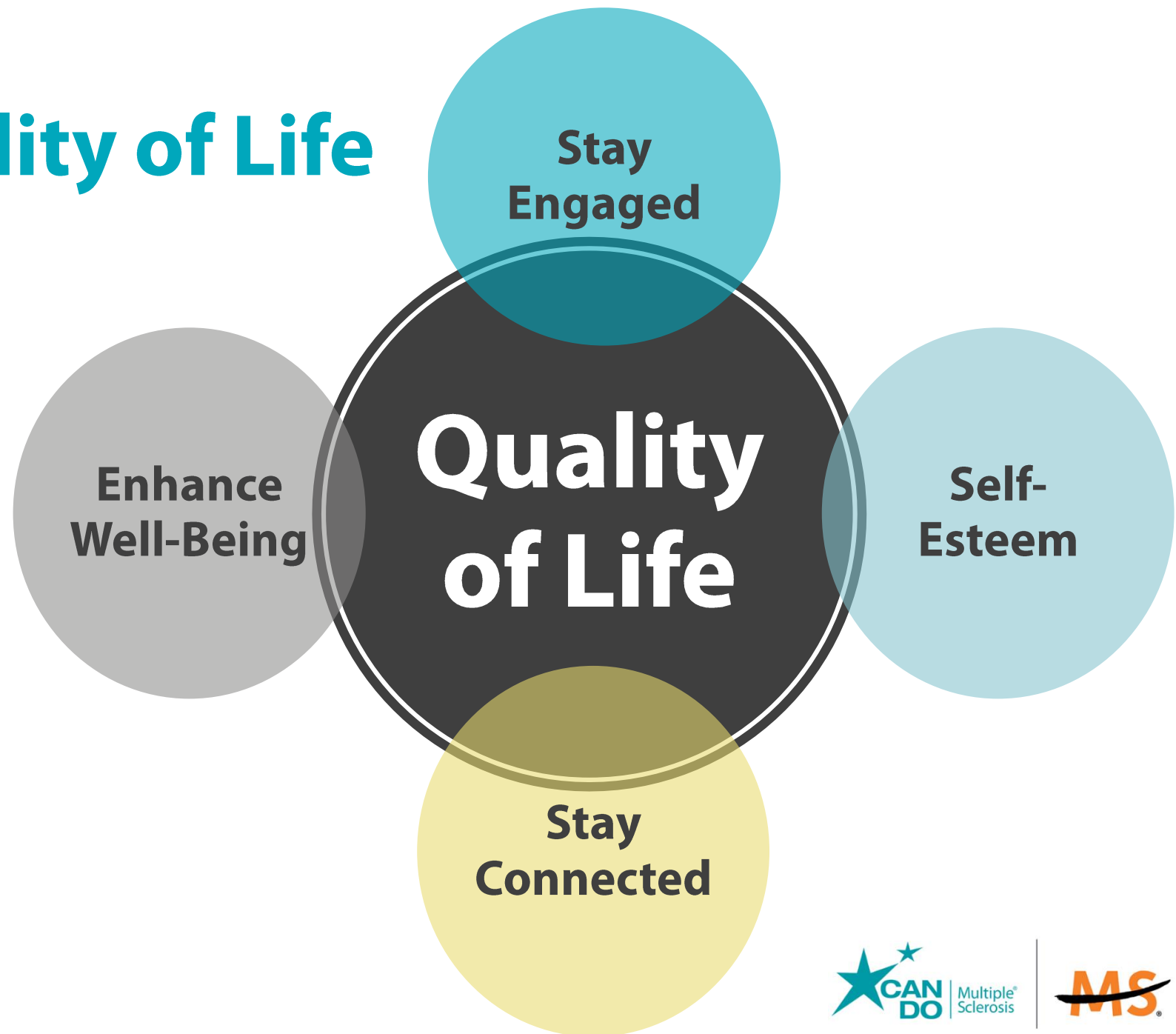
Learning Objectives

- Recognize bowel & bladder dysfunction as symptoms of MS
- Understand how lifestyle modifications can assist with bowel & bladder management
- Understand how your environment can assist in bowel & bladder management
- Identify 3 adaptations that can be made for self-care
- Determine next steps & create small goals to improve bowel & bladder management by end of webinar

Prevalence of Symptoms

- 60% of persons with MS may experience problems with bowel function
- 80% of persons with MS may experience problems with bladder function
- Symptoms may be intermittent or constant
- Symptoms can occur at any time in the disease
- There are many options for management of these symptoms

Quality of Life



Bowel and Bladder

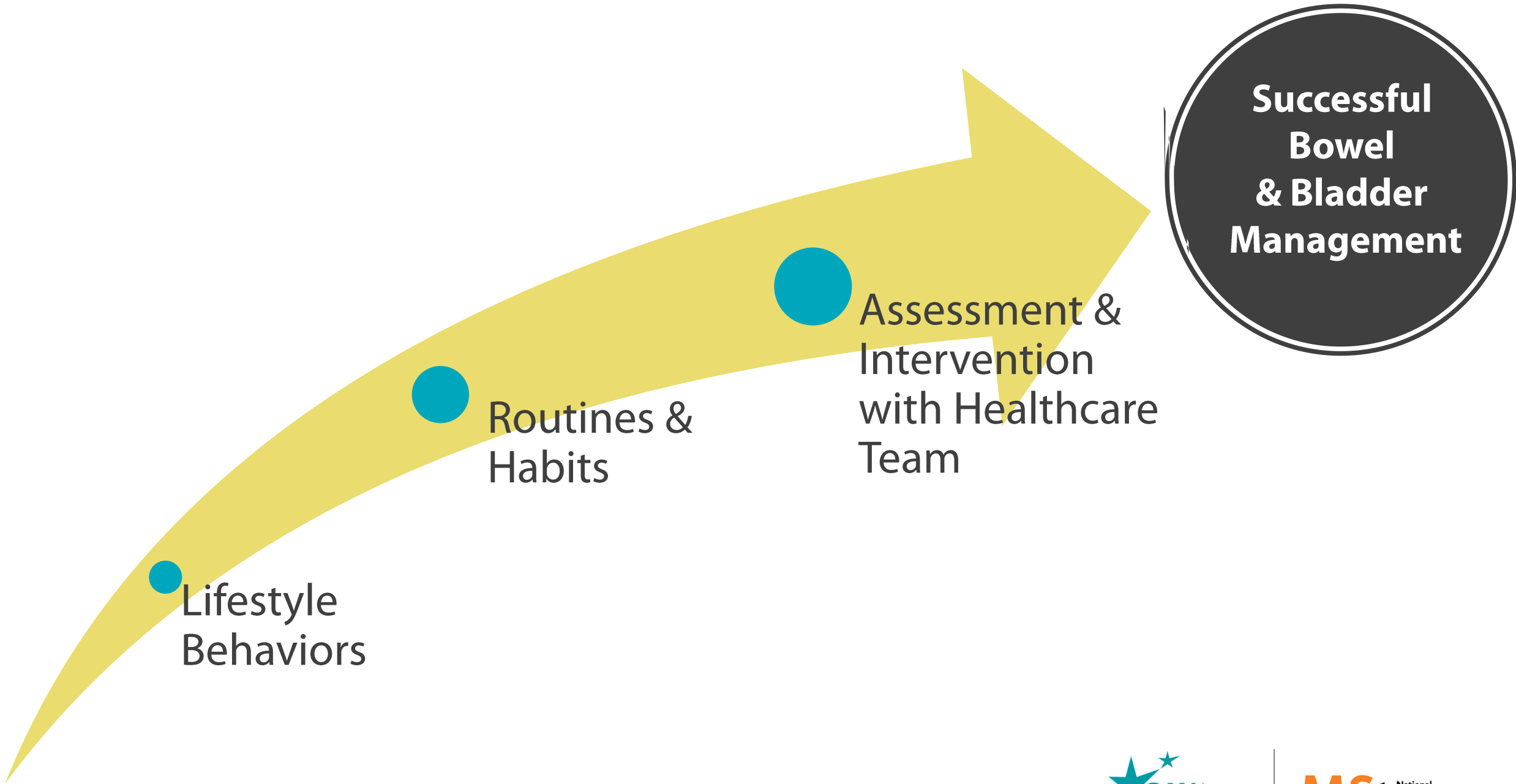


ILLNESS ORIENTATION

- Incontinence
- Fluid restriction
- Frequent urinary tract infections
- Constipation/Irregularity
- Indwelling catheters
- Diapers
- Inappropriate use of medications

WELLNESS ORIENTATION

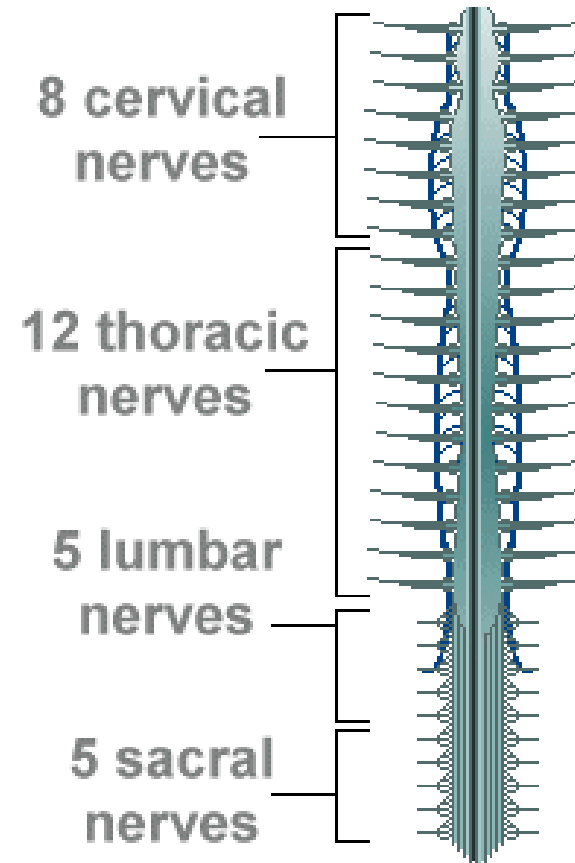
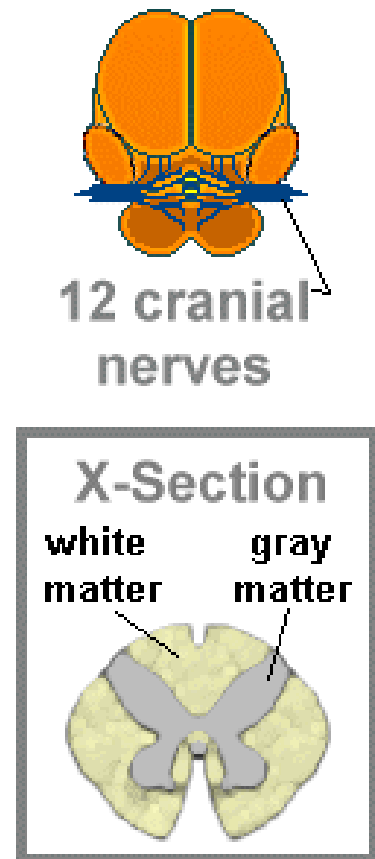
- Continence
- Adequate fluid intake
- Measures to prevent infections
- Regular evacuation
- Proper use of medications
- Control



Bowel Issues



Central Nervous System: Bladder / Bowel Function



Bowel Dysfunction in MS

Common problems (50-68%)*

- Constipation
- Involuntary bowel
- Diarrhea
- Flatulence
- Fecal impaction

* Hinds, J. P., B. H. Eidelman, et al. (1990). "Prevalence of bowel dysfunction in multiple sclerosis. A population survey." *Gastroenterology* **98**(6): 1538-42.



Constipation

- Slow bowel
- Medication effect
- Weak abdominal muscles
- Impaired mobility

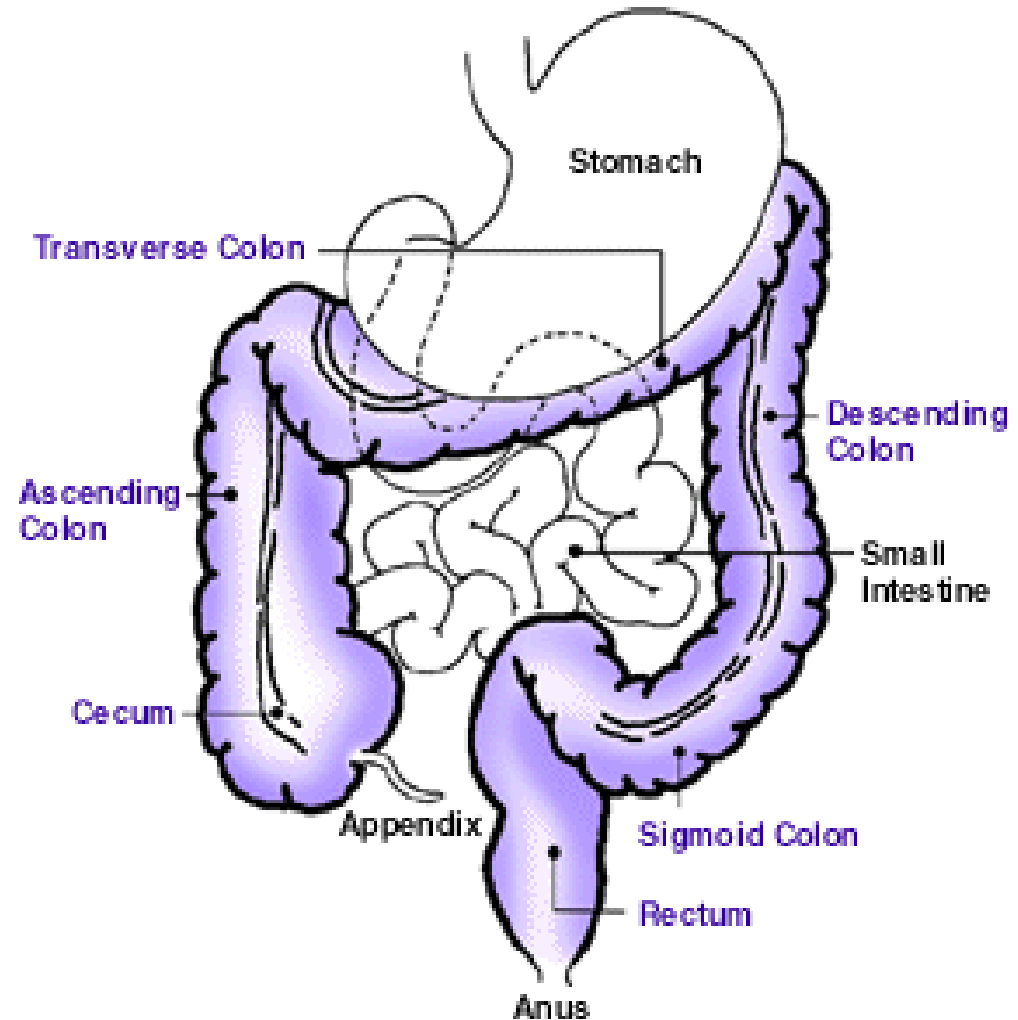


Diagram of the Colon and Rectum

Symptoms Related to Constipation

- Hard-formed stool
- Severe flatus
- Feeling of rectal fullness
- Decreased bowel sounds
- Distended abdomen
- Palpable mass
- Headache
- Anorexia
- Nausea / Vomiting
- Diarrhea (related to fecal impaction)
- Increased fatigue



Bowel Management Goal

- Comfortable bowel movement in an appropriate place



Bowel Management Tips

- Eat regularly for regular bowel habits
- Fluid (48-64 oz/day) and 20-30 grams of fiber a day are needed
- Plan for bowel movement $\frac{1}{2}$ hour after warm beverage or meal (peristaltic activity is strongest at this time)



Helpful Hints



- Take your time - HASTE DOES NOT MAKE WASTE
- Meat does not have fiber
- 1/3 cup of Fiber One, All Bran or Bran Buds can provide 10-12 grams/fiber
- Greasy foods, spicy foods, or food intolerances can cause loose stool
- It takes time to develop regular bowel habits

Lifestyle Behaviors Are Critical!

- Establish a routine
- Nutrition is a cornerstone
- Sleep
- Movement / Exercise
- Role of stress
- Journal for 1-2 weeks to notice patterns





Milk of Amnesia

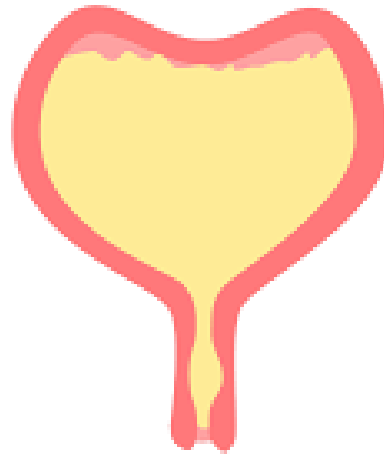
Take it in the morning
and by noon you forget
you were constipated

Treatments for Involuntary Bowel

- Bowel training
- Diet
- Suppositories
- Medication

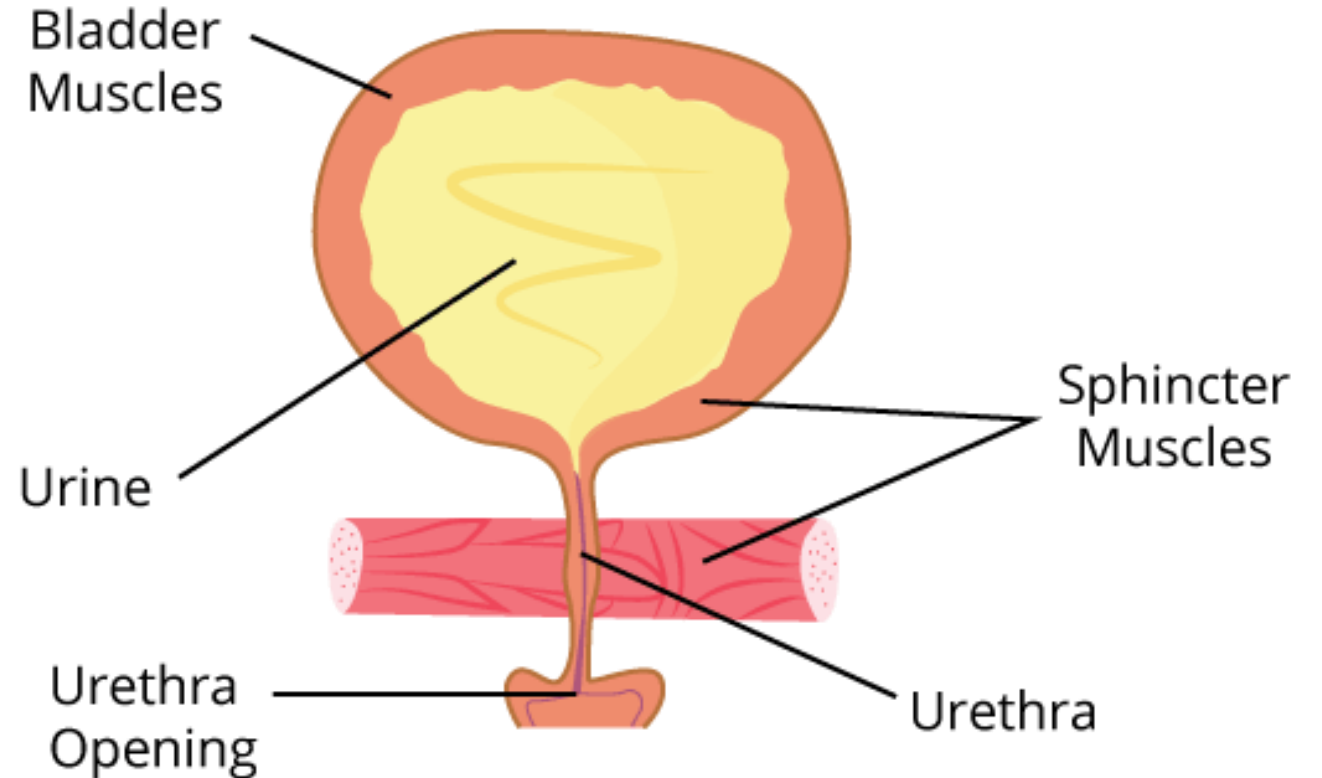


Bladder Issues



Bladder Disturbance

- Inability to store
- Inability to empty
- Symptoms of urgency, frequency, hesitancy, nocturia, incontinence, bladder infections



Treatments: Inability to Store

- Limit fluid intake
- Frequent bathroom breaks
- Quick access to bathroom
- Pads or protective undergarments
- Decreased use of bladder irritants (caffeine, aspartame, alcohol)
- Anticholinergic/antimuscarinic agents



Daily Living Modifications



Bathroom Setup



Room Setup



Clothing Setup

Make Your Bathroom Safe & Efficient



Make Your Bathroom Safe & Efficient



Make Your Bathroom Safe & Efficient



Arrange Your Room To Be Safe & Efficient



Arrange Your Room To Be Safe & Efficient



Wear “Easy-Access” Clothing



Treatments: Inability to Empty

- Adequate fluid intake
- Structured, timed voidings
- Intermittent catheterization
- Alpha blockers / anti-spasticity agents



What Patients Need to Know

- Adequate fluid intake is 1 1/2 - 2 quarts/day (48-64 oz); Water is best (decaf tea or fruit juice is OK)
- Urge to void occurs about 1 1/2- 2 hours after drinking something
- Caffeine, aspartame and alcohol are bladder irritants
- Smoking is a bladder irritant
- Limiting fluid intake is harmful



What Patients Need to Know

- Drink fluids all at once; if you “sip, sip, sip,” you will feel the urge to go often
- Try to void about 1 1/2-2 hours after you drink
- Stop drinking fluids about 2 hours before bedtime
- Void right before bedtime
- It is not normal to leak urine, wake up more than once at night to void, or have frequent UTI’s
- Symptoms of UTI’s
- Effect of UTI’s on MS symptoms
- Importance of early treatment of UTI’s



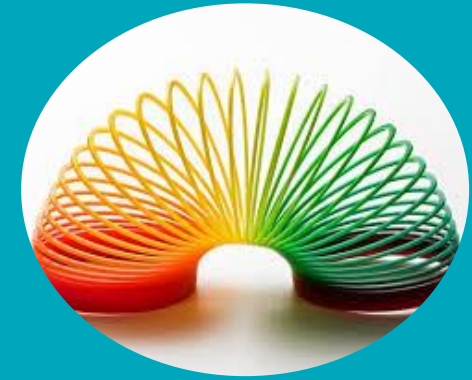
Community Modifications



**Be
Prepared**



Be Familiar



Be Realistic



Be Prepared

Be
Prepared

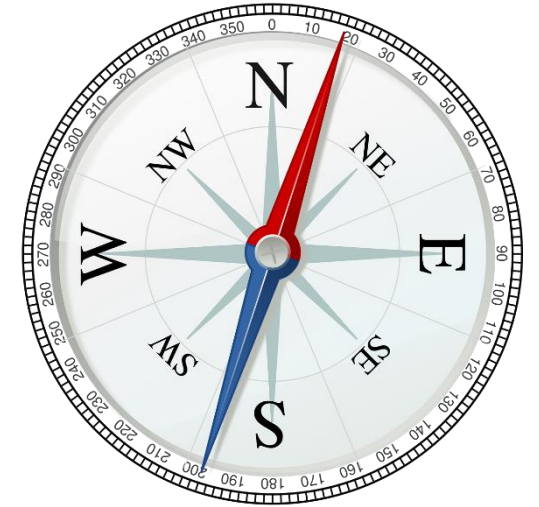
- Wear protection
- Wear easy to remove clothing
- Have back-up clothing
- Adhere to routine



Be Familiar

Be Familiar

- Do research
- Locate bathrooms
- Plan for breaks
- Communication is important



Be Realistic

Be Realistic

- Aware of self-expectations
- Timing & schedule
- Flexibility
- Who are your support systems?



Interventions

- Talk with your healthcare provider about issues with bladder and/or bowel
- Request a referral to a specialist for treatment recommendations
 - Urologist
 - Gastroenterologist
 - Pelvic Floor Specialist



What about Botox?

- Research finds that this muscle relaxant is also a useful treatment for urinary incontinence. With overactive bladder, the bladder muscle contracts too often or without warning.
- Injections into bladder muscle cause small areas to be inactive—decreasing urgency/frequency.
- Treatments will need to be repeated every few months.
- The bladder may not be able to empty as well after Botox, so catheterization may be needed after treatment.

Think of a Kaleidoscope

- One small change can positively change other areas of life
- From this webinar, commit to 1-2 concepts to implement
- Make small-step goals



Resources

Adaptive Equipment

- Amazon
- www.amazon.com

Education

- National Association for Contingence: www.nafc.com
- National MS Society: www.nationalmssociety.org

Supplies

- Home Delivery Incontinent Supplies
- www.hdis.com

Q & A



Programs



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Can Do On Demand

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Need Us

The National MS Society exists because there are people with MS. **Our vision is a world free of MS.** Everything we do is focused so that people affected by MS can live their best lives as we stop MS in its tracks, restore what has been lost and end MS forever.



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MS Path 2 Care

An initiative to empower people affected by MS to be active partners in their healthcare experience.

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Webinar Series



Plan Your Diet, Plan Your Meals

March 12, 2019

Presented by:



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