

Improving Continence Care:

10 Must-Know Facts about Incontinence

Incontinence, defined as the involuntary loss of urine or feces, is a condition that is rarely spoken about – despite the fact that it affects millions of people globally and has a major impact on users' and carers' well-being, dignity as well as on health care costs. Access to appropriate solutions not only improves the quality of life of those with incontinence, it also generates value for society.

1. **Incontinence can have a severe impact on health-related quality of life**¹, and affects almost 400 million people worldwide²



2. **Incontinence is classified as a set of diseases** by the World Health Organization and consequently, absorbent incontinence aids have to be classified as medical devices in most countries around the world³



3. Roughly **1 in 3 women** over the age of 35⁴ and as many as **1 in 4 men** over the age of 40 experience some form of urine leakage⁵



4. **30% of all informal carers** who care for someone 70+, care for a person with incontinence⁶



5. **1 in 5 people** caring for a person with incontinence report a significantly lower Quality of Life score than the average carer⁷



6. The International Organization for Standardization's ISO 15621 standard defines **20 criteria** to guide the selection of the most suitable absorbent product⁸



7. Incontinence can be **treated, sometimes cured, and always managed**.⁹ Personalized care should aim to maintain or restore continence, or manage incontinence with purpose made products



8. **Proper product selection** and continence care routines* preserve users' dignity, and make it easier for them to join in social activities¹⁰



9. Optimized continence care routines* can **reduce unnecessary workload by 44%**¹¹



10. Better match between needs and products, **reduce waste disposal by 31%** if clear guidance is in place* and adhered to¹¹



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visiting essentialsinitiative.com

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Sources

¹Coyne, Kvasz, Ireland, Milsom, Kopp, Chapple. Urinary incontinence and its relationship to mental health and health-related quality of life in men and women in Sweden, the United Kingdom, and the United States, European Urology Volume 61, issue 1 (January 2012).

²Irwin DE, Kopp ZS, Agatep B, Milsom I, Abrams P. Worldwide prevalence estimates of lower urinary tract symptoms, overactive bladder, urinary incontinence and bladder outlet obstruction. BJU Int. 2011;108:1132-8.

³<http://apps.who.int/classifications/icd10/browse/2016/en>; EU: MDR 2017/745, US: QSR CFR 21 part 820, Canada: MDR SOR/98-282, Australia: The Therapeutic Goods Act 1989.

⁴ICI, EPIC study, TNS study

⁵Based on a survey including men over 40, conducted by SCA in 2012 in US, UK, Germany, Italy, Russia and Mexico. File date that was not published.

⁶SCA Hygiene Products estimate

⁷Global care giving relatives segmentation study, Ipsos in cooperation with SCA Hygiene Products, 7 countries (Brazil, China, France, Germany, Russia, Spain, USA) Oct 2011 – Mar 2012.

⁸ISO/TC 173/SC 3/WG 2 Urinary absorbing aids

⁹ICS WQW Factsheet, 2015 www.ics.org/public/wqw

¹⁰SCA data on file (staff questionnaires): All statistics are based on results from between 86-105 TENA Solutions case studies (depending on question) around the world, mainly Europe but also USA and Canada. Results vary across countries and care homes. 2012-14.

¹¹SCA Data on file: All statistics are based on average percentages from between 85-181 TENA Solutions case studies around the world, mainly Europe but also USA, Canada and China. Results vary across countries and care homes

*In the framework of TENA Solutions and the implementation of TENA good practices