

# MANAGEMENT OF BLADDER AND BOWEL DURING AND AFTER CANCER TREATMENTS

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# LEARNING OBJECTIVES



- Understand the types of bladder and bowel problems that can occur with cancer and its treatment;
- Consider the management options available;
- Consider management of bladder and bowel problems in palliative care;
- Offer some continence management resources for healthcare professionals to use in supporting patients.

# BLADDER & BOWEL FACTS



- It is estimated around **14 million** people in the UK suffer from a bladder problem, and **6.5 million** with some form of bowel problem (Bladder and Bowel Community 2018)
- There may be up to **3 million** people in the UK with urinary incontinence. **60-80%** have never sought medical advice for the condition (British Association of Urological Surgeons 2018).

# WHAT IS THE IMPACT?



Social  
isolation

Cost



Recovery

Dignity

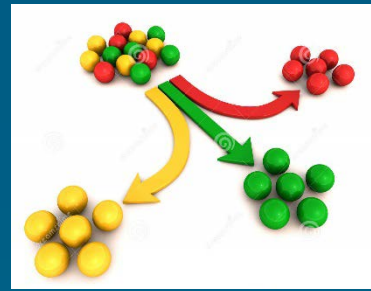


Relationships



Mental &  
physical  
health

# BLADDER & BOWEL PROBLEMS IN CANCER: CLASSIFICATION BY AETIOLOGY



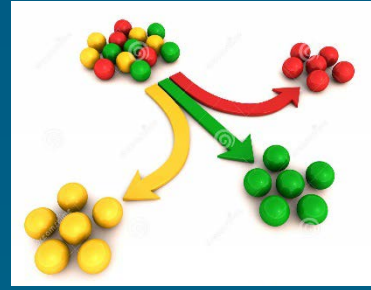
## Problems caused by disease

- Bladder:
  - Bladder outlet obstruction caused by carcinoma in situ;
  - Inflammation of the bladder in primary bladder tumour;
  - Bladder dysfunction caused by neurological damage;
- Bowel:
  - Bowel symptoms caused by bowel cancer;
  - Bowel dysfunction caused by neurological damage.

## Problems caused by treatment

- Bladder:
  - Chemotherapy-induced haemorrhagic cystitis;
  - Radiotherapy-induced bladder irritation;
  - Intrinsic sphincter deficiency caused by surgery.
- Bowel:
  - Immunotherapy-induced colitis;
  - Chemotherapy-induced diarrhoea and/or constipation;
  - Radiotherapy induced bowel problems;
  - Diarrhoea/constipation after bowel surgery.

# BLADDER & BOWEL PROBLEMS IN CANCER: CLASSIFICATION BY EFFECT



**Voiding dysfunction:**  
'Can't get it out'

- Retention
- Constipation



**Incontinence:**  
'Can't keep it in'

- Leakage
- Urgency
- Frequency

# BLADDER & BOWEL PROBLEMS IN CANCER: MANAGEMENT



Management is dependent on:

- Aetiology of the dysfunction;
- Impact on the patient;
- Circumstances of the patient;
- What is practical to offer.

Regular  
assessment

Proactive  
discussion

Context of  
care

Patient  
preferences

## BLADDER & BOWEL PROBLEMS IN CANCER: MANAGEMENT EXAMPLES



Patient experiencing urinary leakage post-prostatectomy

- Reassurance
- Pelvic floor exercises
- Referral to continence physiotherapist
- Dietary advice
- Containment devices
- Medication e.g. anti-cholinergics
- Surgical treatment



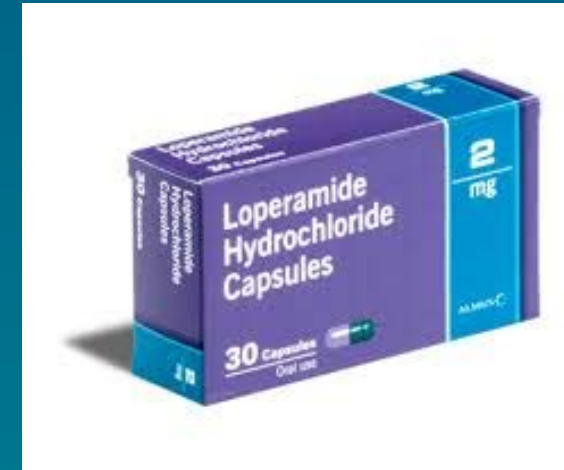


# BLADDER & BOWEL PROBLEMS IN CANCER: MANAGEMENT EXAMPLES



Patient experiencing faecal incontinence post-pelvic radiotherapy

- Reassurance
- Assessment of access to toileting facilities
- Pelvic floor exercises
- Referral to continence physiotherapist
- Dietary advice
- Containment devices
- Medication e.g. loperamide
- Surgical treatment for anal fissure or stricture, artificial anal sphincter
- Specialist assessment and treatment e.g. biofeedback, electrical stimulation



# BLADDER & BOWEL PROBLEMS IN CANCER: MANAGEMENT EXAMPLES



Patient experiencing urinary retention at end of life

- Reassurance
- Appropriate investigations
- Urinary catheter?
- Medication review



Be aware of potential differences in goals of care in EoL setting

## BLADDER & BOWEL PROBLEMS IN CANCER: RESOURCES

Clinical nurse specialists

Urology team

MDT

Local continence service

Continence Product Advisor:

<https://www.continenceproductadvisor.org/>



## Types of Female Devices



Internal Urethral  
Devices



Internal Vaginal  
Devices

External Urethral  
Devices

## Female Devices

Female

A female device is designed to prevent urinary leakage, usually for women with [stress urinary incontinence](#) (SUI).

Click on the pictures below for more information about female devices.

Share:



### Contents

1. [Categories of female device](#)
2. [How to get help](#)

## Categories of female device

There are three main categories of Female devices<sup>1</sup>

[External urethral devices](#) - products that are applied over the [urethra](#) at the opening

[Internal urethral devices](#) - products that are placed inside the urethra

[Internal vaginal devices](#) - products that are inserted into the vagina

## How to get help

Click on [Product Advisor](#) for help choosing between the different devices.

Click on the pictures below for detailed information about the products.

### More likely to suit you if...

- ✓ You mainly have stress urinary incontinence
- ✓ You have good hand control
- ✓ You have good memory and mental function
- ✓ Using a device (as opposed to a pad) is acceptable to you
- ✓ Preventing leakage is more important to you than containing it

### Less likely to suit you if...

- ✗ Your leakage is mainly associated with urgency
- ✗ Urinary tract infection is a major concern for you

### Top Tips

+ Be the first, add your tip for this product

### Evidence

- 📖 Lipp A SCGK. Mechanical devices for urinary incontinence in women. Cochrane Database of Systematic Reviews 2011.

# THANKS TO

- NIHR
- Clinical managers
- Dr Cathy Murphy, Senior Research Fellow, University of Southampton
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# FURTHER READING AND RESOURCES

- *NICE Guidelines:*
  - Faecal incontinence in adults: management (2007)
  - Lower urinary tract symptoms in men: management (2010)
  - Urinary incontinence in women: management (2013)
- *For patients:*
  - Bladder and Bowel Community <https://www.bladderandbowel.org/>
  - Macmillan Cancer Support <https://www.macmillan.org.uk>
  - Prostate Cancer UK <https://www.prostatecanceruk.org/>
- *Toileting in palliative care:*
  - Farrington N, Fader M, Richardson A (2013) Managing urinary incontinence at the end of life: an examination of the evidence that informs practice. *Int J Palliat Nurs* 19(9): 449–456.
  - Farrington N, Fader M, Richardson A, Prieto J, Bush H (2014) Indwelling urinary catheter use at the end of life: a retrospective audit. *Br J Nurs* 23(9): S4-10
  - Farrington N, Sartain S, Fader M, Richardson A (2015) Exploring the role of practical nursing wisdom in the care of patients with urinary problems at the end of life: a qualitative interview study. *J Clin Nurs* 24(19-20): 2745–5.
  - Farrington N, Hill T, Fader M, Richardson A (2016) Supporting women with toileting in palliative care: use of the female urinal for bladder management. 22(11): *Int J Palliat Nurs* 524–533.