## 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.

Incontinence can have a severe impact on health-related quality of life<sup>1</sup>, and affects almost 400 million people worldwide<sup>2</sup>



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 world<sup>3</sup>



Roughly 1 in 3 women over the age of 35<sup>4</sup> and as many as 1 in 4 men over the age of 40 experience some form of urine leakage<sup>5</sup>



30% of all informal carers who care for someone 70+, care for a person with incontinence<sup>6</sup>



1 in 5 people caring for a person with incontinence report a significantly lower Quality of Life score than the average carer<sup>7</sup>



The International Organization for Standardization's ISO 15621 standard defines 20 criteria to guide the selection of the most suitable absorbent product<sup>8</sup>



Incontinence can be treated, sometimes cured, and always managed9. Personalized care should aim to maintain or restore continence, or manage incontinence with purpose made products



Proper product selection and continence care routines\* preserve users' dignity, and make it easier for them to join in social activities<sup>10</sup>



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



Better match between needs and products, reduce waste disposal by 31% if clear guidance is in place\* and adhered to<sup>11</sup>





Learn more about incontinence by visiting

www.tena.com

Sources <sup>1</sup>Coyne, 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). <sup>2</sup> Irwin 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;108:11328. <sup>3</sup> http://apps.who.int/classiications/icd10/browse/2016/en; EU: MDR 2017/745, US: QSR CFR 21 part 820, Canada: MDR SOR/98282, Australia: The Therapeutic Goods Act 1989. <sup>4</sup>ICI, EPIC study, TNS study <sup>5</sup>Based 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.

<sup>7</sup>Global 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. <sup>8</sup> ISO/TC 173/SC 3/WG 2 Urinary absorbing aids

<sup>10</sup>SCA data on ile (sta questionnaires): All statistics are based on results from between 86105 TENA Solutions case studies (depending on question) around the world, mainly Europe but also USA and Canada. Results vary across countries and care homes. 201214. <sup>11</sup>SCA 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.

<sup>6</sup>SCA Hygiene Products estimate <sup>9</sup>ICS WCW Factsheet, 2015 www.ics.org/public/wcw

Results vary across countries and care homes \*In the framework of TENA Solutions and the implementation of TENA good practices