

Welcome to today's Webinar:

*Bowel and Bladder Changes in  
Multiple Sclerosis*

Your Presenter is Fiona Easton  
Your Facilitator is Annie Sassin

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**Acknowledgement**



We acknowledge and pay respect to the traditional custodians past and present on whose lands we meet today.

We acknowledge the deep feelings of attachment and the relationship of Aboriginal people to country and respect the cultural authority of the elders in each community.

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## Introduction to Presenter



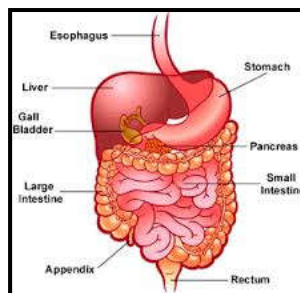
Fiona Easton is a registered nurse as well as an MS Continence Nurse Advisor and has been working at MSL for 12 years. Fiona's main role involves conducting the continence clinic at the MS Blackburn site as well as the MS Watsonia and Williamstown supported living sites in Melbourne.

Fiona has a 4-year psychology degree and has experience in palliative care and crisis counselling.

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## The Normal Bowel










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## Bristol Stool Chart





Bristol Stool Chart	
Type 1	 Separate hard lumps, like nuts (hard to pass)
Type 2	 Sausage-shaped but lumpy
Type 3	 Like a sausage but with cracks on its surface
Type 4	 Like a sausage or snake, smooth and soft
Type 5	 Soft blobs with clear-cut edges (passed easily)
Type 6	 Fluffy pieces with ragged edges, a mushy stool
Type 7	 Watery, no solid pieces. <b>Entirely Liquid</b>

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## Bowel Dysfunction



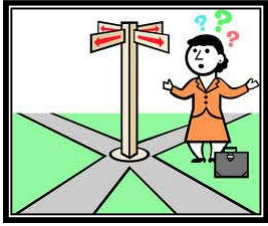

Bowel dysfunction is another common symptom associated with Multiple Sclerosis

Surveys have indicated that 75% of people with Multiple Sclerosis have bowel dysfunction at some stage

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## Who can help ?



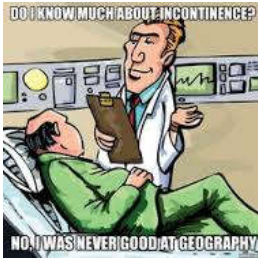

Assessment by:

- Continence Nurse
  - local doctor
- Gastro-enterologist

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## What Happens in a Bowel Assessment?



DO I KNOW MUCH ABOUT INCONTINENCE?  
NO, I WAS NEVER GOOD AT GEOGRAPHY.

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**Some tests your doctor may order** 

- Colonoscopy
- \*Sigmoidoscopy
- Prolapse check
- Faecal incontinence : may need anal sphincter check ( have you lost the ability to hold in the faeces . Client can still pass T4 but have FI assoc with MS

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**Bowel problems associated with MS** 

1. Loss of, or very reduced, peristalsis
2. Loss of the gastro-colic reflex
3. Spasticity of the anal sphincter
4. Loss of sensation in the anus and rectum

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## Loss of Peristalsis: Treatment



- Regular aperients, either daily or second daily
- No added fibre
  - fibre in the diet is needed but, as the bowel has lost some of its movement, any excess bulk cannot be pushed through the bowel
  - this may increase constipation or cause impaction
- If constipation continues, then a regular enema (Microlax or Bisalax) may be necessary

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## Loss of the Gastro-colic Reflex: Treatment




- Try to empty bowels every day, even though the urge to empty the bowel may not be present
- If necessary, a regular aperient may be used

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### Spasticity of the Anal Sphincter: Treatment



- If the sphincter does not relax, use a glycerine suppository but if IBS is suspected do not do this
- If the sphincter does not close properly, constant soiling will occur
  - if this happens, you may then need to see a colo-rectal surgeon


IT'S A SUPPOSITORY.



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### Loss of Sensation in the Anus or Rectum: Treatment



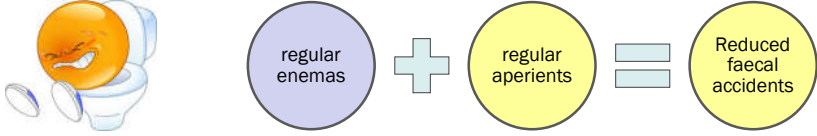

A glycerine suppository before exercise will reduce the risk of faecal incontinence

Most people do not have a problem with this when they are at home

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## Spasticity of the Colon: Treatment



The diagram illustrates a treatment strategy for spasticity of the colon. It features an illustration of a toilet with a smiling orange face. To its right, a purple circle labeled 'regular enemas' is followed by a plus sign, then a yellow circle labeled 'regular aperients', followed by an equals sign, and finally a yellow circle labeled 'Reduced faecal accidents'.

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A cartoon illustration shows Santa Claus sitting in a green chair on a stage, talking to a man with a cane who is also sitting on a stage. The man with the cane has a speech bubble that says 'ONE REALLY GOOD BOWEL MOVEMENT.' The cartoon is signed 'Graham McGehee' in the bottom left corner.

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**The Medication Maze** 

**Stool softeners**

- Docusate (Dulcolax, Coloxyl),
- MOVICOL – ( osmotic stool softener, can have 8 per day

**BULKING AGENTS:**

- Metamucil (Psyllium), ( bulking agent )
- Lactulose ( need to drink a lot of water for this to work )

**Stimulant laxatives**

- Senna/
- Bisacodyl
- Castor Oil


**Suppositories – Bisalax, Glycerine /ENEMAS /PERISTEEN**

**Antidiarrheal medications - Imodium, Lomotil**




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**Bowel management tips** 

**Know your bowel history - What have they been like in the past ?**



- Timing – normal stooling time
- Privacy and comfort
- Relaxation
- Adopt a good stooling position- bearing down+ massage
- Fluids
- Diet
- Medications
- Illness
- Exercise
- Weather
- Assistive devices – Suppositories etc Keep on plan \*



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**Basic First Aid for Bowel Problems**



Knees higher than hips  
Lean forward and put elbows on knees  
Bulge abdomen  
Straighten spine

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**Squatty Potty**



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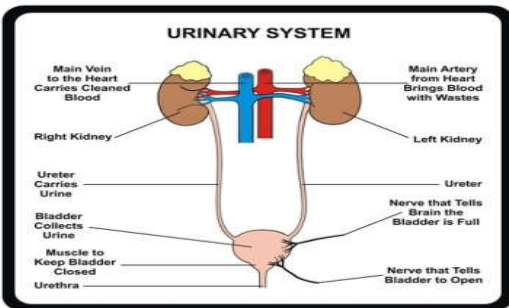
Bladder

What's Normal?

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What is the Urinary Tract?

MS




The diagram, titled "URINARY SYSTEM", shows the internal organs and their functions. It includes labels for the Main Vein to the Heart (carrying cleaned blood), Main Artery from Heart (bringing blood with wastes), Right Kidney, Left Kidney, Ureter (carrying urine), Bladder (collecting urine), Muscle to Keep Bladder Closed, Urethra, and Nerve that Tells Brain the Bladder is Full. It also indicates the Nerve that Tells Bladder to Open.

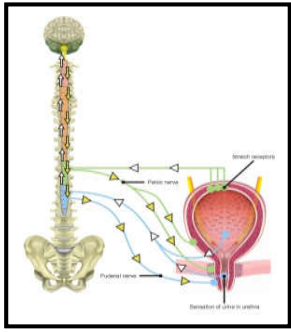
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## Bladder Dysfunction





Bladder dysfunction associated with multiple sclerosis is caused by the interruption of nerve pathways / impulses that control the passing of urine (micturition)



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## Bladder Dysfunction




Bladder dysfunction is one of the most common symptoms associated with multiple sclerosis

Surveys have indicated that 60 - 90% of people with multiple sclerosis have bladder dysfunction at some stage

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**Bladder Dysfunction Associated with MS** 

1. Failure to store (detrusor overactivity)
2. Failure to empty- doesn't empty properly (retention-detrusor failure)
3. A bladder that combines the 2 types of dysfunction as above (detrusor sphincter dyssynergia)

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**What Happens in a Bladder Assessment?**

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## Unstable or Overactive Bladder: Treatment

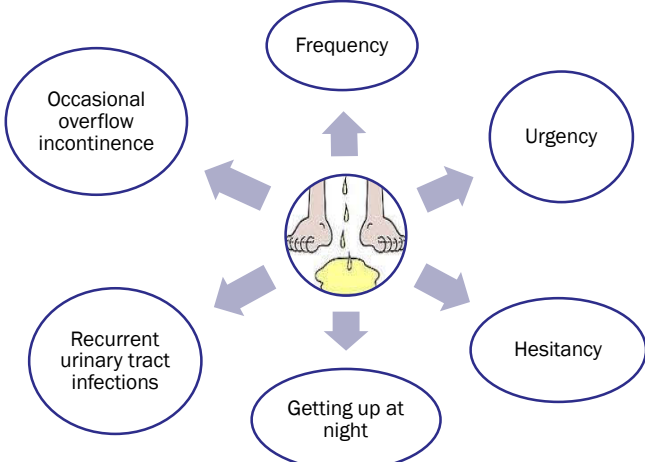



- Anticholinergic medications:
  - Oxybutnin (Ditropan) (Oxytrol patches)
  - Tolterodine (Detrusitol)
  - Solifenacin (Vesicare)
  - Mirabegron (Betmiga)
- SNS
- Botox injection

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## Retaining Urine: Symptoms



Frequency

Urgency

Hesitancy

Getting up at night

Recurrent urinary tract infections

Occasional overflow incontinence

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## Detrusor Sphincter Dyssynergia: Symptoms



- Frequency
- Urgency
- Recurrent urinary tract infection
- Sudden flooding incontinence
- Getting up at night to pass urine



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## Detrusor Sphincter Dyssynergia: Treatment




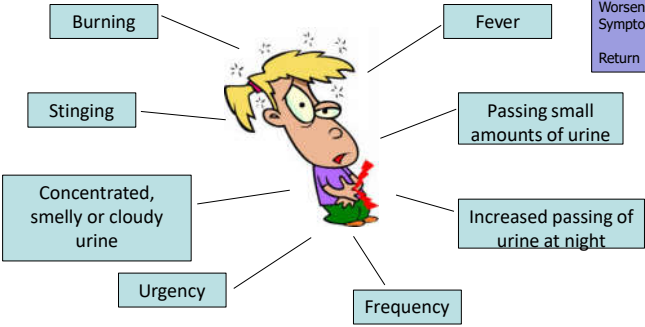
- Medication
- Clean, intermittent catheterisation
- Permanent Indwelling Catheter (Urethral or Supra Pubic)

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## Urinary Tract Infection: Symptoms






Fatigue  
Worsening of MS Symptoms  
Return of recent symptom


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## Some Simple Things to Help Reduce Infections



- Drink plenty of clear fluid
- Do not restrict fluids
- Add lemon to water
- Cranberry
- If catheterised – have urine culture and ma
- Probiotics
- Keep antibiotics to a minimum




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## Basic First Aid for Bladder Problems

- Review caffeine intake
- Review fluid intake
- Elevate feet
- Avoid constipation
- One change at a time
- Diet and exercise
- Talk to a doctor, a MS Nurse or a continence nurse



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## Recommendations

QUESTION : Can you identify something that you could do to manage your symptoms ?

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## Other Helpful Titbits

- Contenance Aids Payment Scheme [www.bladderbowel.gov.au/caps/](http://www.bladderbowel.gov.au/caps/)
- Universal Key [www.masterlocksmiths.com.au](http://www.masterlocksmiths.com.au) or type in MLAK Key
- Helpful internet sites:
  - [www.continence.org.au](http://www.continence.org.au)
  - [www.bladderbowel.gov.au](http://www.bladderbowel.gov.au)
  - [www.toiletmap.gov.au](http://www.toiletmap.gov.au)
- Useful apps for smart phones:
  - Wheelmate - tells you where the nearest accessible toilet is to your current location
  - National Public Toilet Map
  - Cathnow - an alarm reminds you to catheterise

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## How to source advice for all continence issues



- MS Connect 1800 042 138
- National Continence Helpline 1800 330 066
- General Practitioner

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**Summary** 

- How MS affects bowel and bladder
- First aid
- Where to get help

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**Questions** 

MS Connect  
1800 042 138  
[msconnect@ms.org.au](mailto:msconnect@ms.org.au)

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## MS Connect



**10 reasons to call us:**


1. Up-to-date, evidence based information about multiple sclerosis
2. Expert advice on managing symptoms
3. Information about minimising the impact of multiple sclerosis
4. Support for people who are newly diagnosed
5. Information about treatment options
6. Education programs
7. Connections to other people living with multiple sclerosis
8. Referrals to appropriate services in your area
9. Extra support for you and your family
10. Respite options to give families short-term breaks



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## Peer Support



- ❖ 1:1 Phone Support
- ❖ Face to Face groups -  
*(temporarily converted to Telegroups)*
  - 2 in the ACT
  - 11 in Tasmania
  - 17 in NSW
  - 42 in Vic
- ❖ Telegroups
  - Currently running 12 telegroups
- ❖ Facebook groups
  - 3 groups – for people living with MS
  - for carers
  - for young carers – up to 25 years of age



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## Get Your Act Together

- Online Tool – designed to help you better manage your multiple sclerosis symptoms
- Focuses on some of the common symptoms of MS – emotions, fatigue, continence, cognition, pain and heat sensitivity
- Designed for people living in the ACT but includes useful information for all people living with MS
- Complete the tool to receive a personalized report (listing services, resources, tips etc)

**Visit [www.ms.org.au](http://www.ms.org.au) and search Get Your Act Together**

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## Employment Support Services

The MS Employment Support Service (ESS) is the only MS specialist employment service for people living with multiple sclerosis in Australia that can help you succeed at work, whether that is staying in your current job or finding new employment.

Contact MS Connect for more information on free call 1800 042 138.

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## Registered NDIS Provider

MS is a registered NDIS provider in NSW, ACT, Vic and Tas and is approved to provide:  
*(Pls note: Face to face services/programs have been either converted to online programs or postponed)*

- Assistance with 'Access Request Forms', Access rejections and pre-planning
- Support Coordination – assistance to help make your plan active
- Plan Management
- Short term accommodation (Vic)
- Group activities – yoga, dance for health, exercise (NSW)
- Exercise Physiology (NSW)
- Specialist Continence Assessment (Vic)
- Occupational Therapy (NSW and Vic)
- Physiotherapy (NSW)

Want to learn more?  
 Please call  
 MS Connect  
 1800 042 138

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## My Aged Care

**My Aged Care** is an Australian Government initiative, website and phone line to help you find about aged care services.

**Available to people who are 65 years of age and over.**

**Why Contact My Aged Care?**

- ✓ Information
- ✓ Assistance in mapping out your needs
- ✓ An assessment for further supports

**Phone:** 1800 200 422 Free call Australia wide

**Website:** <https://www.myagedcare.gov.au>

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**Podcasts for Clients** 




**PODCASTS**

<https://www.ms.org.au/support-services/education/podcasts.aspx>

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**Thank you** 

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[msconnect@ms.org.au](mailto:msconnect@ms.org.au)

Please stay on after this webinar to complete a short survey.

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