

Embarrassing moments

• DR. BATYA L. LUDMAN

Many years ago, I worked with a mom around her almost four-year-old's lack of interest in toilet training. Feeling secure in diapers, although this bright child could happily name every dinosaur's genus and species, he felt no need to be toilet trained and wear underwear. Mom's fear that he'd go off to college in diapers deepened when he spotted adult diapers in a pharmacy and excitedly commented that now he'd never have to say goodbye to his.

Toilet training is such a hallmark of childhood that young parents are prone to discuss these basic bodily functions, anywhere, anytime and with little embarrassment. "Pee and poop" is part of the "lingua franca" among young families. Add several decades and these same parents, however, have great difficulty now addressing their own "plumbing" and other issues regarding "what's down there" and why doesn't it work as well as it possibly should, other than in the form of a joke. It is often just too embarrassing to discuss the topic seriously and openly.

Many men and women, and definitely not exclusively seniors, experience a variety of bladder and bowel issues, as well as issues concerning intimacy and sexuality. (Each area deserves several columns, but for brevity, here I address certain issues they have in common.)

These issues may have a huge impact on an individual's quality of life and on their relationship with their partners as well as others, but sadly they are infrequently raised with those they care most about. It could be urinary incontinence, brought on by a sneeze, cough, or an overactive bladder, irritable bowel syndrome (IBS) that may keep a college student from socializing, eating out or going to work, or concerns around erectile dysfunction, to name just a few of the lengthy list of possibilities. These problems can feel totally debilitating and can lead to a deep sense of humiliation. While they may at times be clearly quite disabling, and definitely challenging, they are thankfully not life threatening.

The good news is that these issues may be very treatable

Many people erroneously think that there is nothing to do about them and feeling very much alone, suffer needlessly both physically and psychologically in silence, without ever seeking help. These issues impact not only the individual who is suffering, but may affect their partner, family, friends and colleagues. They may interfere with one's sexuality, ability to exercise, travel, eat, sleep and more, leading to increased stress, anxiety, withdrawal, shame, anger, frustration, social isolation, obsessional thinking, depression, as well as a myriad of other issues. It is therefore crucial to remove the shroud of secrecy and have these important conversations, to elucidate the concerns and gain clarity with respect to what actually can be done about them. Once this happens, proper evaluation and treatment can ensue.

Many of these issues are both unrecognized and therefore underreported, with some of these issues thought to be affecting more than 50% of certain groups (for example urinary incontinence in women over 50 or an enlarged prostate in men of the same age). These have been thought to be minimal estimates and unless a busy physician actually takes the time to ask their patients about bladder, bowel and sexual functioning, few will volunteer this information. Irritable bowel symptoms, which affect up to 20% of the population, peak in their 20s and 30s, especially



'MANY PEOPLE suffer needlessly both physically and psychologically in silence.' (frankieleon/flickr)

among women, yet studies show that 33%-90% of patients don't consult a physician. Instead, many will attribute these various issues, for example, to stress or the aging process and "settle" when there may be other causes and a variety of effective treatments available and worth pursuing.

ONE OF the consistent features of problems such as these is the tremendous sense of lack of control and unpredictability. Given that most of us thrive when able to plan or predict, when you never know if and why something will or won't happen, and then how and what to do about it, the default reaction often leads to feeling incapacitated and unable to relax, which may inadvertently lead to further isolation, anxiety and depression. So while, for example, exercise and maintaining an active lifestyle, traveling or going out to various events can keep one feeling young and fit, the very inability to always be close to a toilet or fear of the repercussions can force someone prematurely into a less healthy and more sedentary

lifestyle when even a short walk may feel traumatic. Taking these issues into the workplace, one sees increased work interruption, reduced concentration, inability to perform certain physical tasks, decreased self-confidence, poor self-image, lack of independence and more.

The good news is that these issues may be very treatable and if you are suffering with any of them in silence, it's important to know that you shouldn't. You can actually get the help you need and achieve a lifestyle far more compatible with what you had hoped for. It all starts with a full and detailed assessment, which is necessary to determine the cause and the extent of the problem. This way, treatment can be individually tailored to your needs.

You may want to start initially with discussing these issues with your family physician or gynecologist. Depending on the nature of the problem, referral can be made to other more specialized healthcare providers such as urogynecology, pelvic floor specialists, urology, physiotherapy, dietician or gastroenterology. Clinical psychology serves an important role in providing psychoeducation, supportive counseling, cognitive behavior therapy and biofeedback. Group therapy is also a possibility and can offer insight into how others cope in similar situations and provide reassurance that you don't have to feel isolated and alone. Often a multidisciplinary approach where many specialists work together as a team along with you, allows for valuable input and often more expedient care.

At some point, you will need a detailed medical assessment which includes a personal, family, social, psychosexual and medical history, a detailed physical exam and laboratory and other medical tests. It is very important to look at what coping strategies may or may not have been effective to date. Needless to say this all takes time, expertise, patience and a good match between you and the various healthcare providers.

Finally, the goal is to enable you to work with the therapists individually or as a team in a comfortable and empathetic environment to receive the most effective and excellent treatment available. This might include the provision of exercises, psychoeducation, non-invasive treatment, diets, medications or in some cases minimally invasive surgery. It is amazing how empowering this can be and how your quality of life can be altered dramatically with minimal intervention. Good physical and mental health is one of the very best gifts that you can give to yourself. It can start with picking up the telephone. ■

The writer is a licensed clinical psychologist in private practice in Ra'anana, and author of Life's Journey: Exploring Relationships – Resolving Conflicts. She has written about psychology in The Jerusalem Post since 2000. ludman@netvision.net.il, www.drbatyaludman.com.