

Peri-care. It's short for perineal care, or hygiene provided *down there* for urine and stool incontinence. Perineal care is often distressing, frustrating, and embarrassing for a person living with dementia. Ditto for the care partner. Here are a few immediate thoughts based on my experience as a nurse/care partner.

Limiting fluids, to reduce urination, can be more harmful by causing dehydration and the accompanying increased confusion, urinary tract infections, and constipation.

Unrelieved constipation leads to impacted stool. The tell-tale sign of impaction is frequent, liquid stool, as stool liquefies behind an impaction and leaks around the blockage causing excoriated, painful skin irritation. Constipation is one of the most overlooked problems leading to pain, behavior changes, loss of appetite, pacing, and attempts to remove the stool. Bowel regimes are beyond this topic but well worth learning about!

Here are my *go to* strategies for providing hygiene. If you don't know the person, find out any idiosyncrasies that trigger distress to promote a comfortable encounter. Hum, sing, dance, chat, or remain silent based on this knowledge.

Have a silent partner taking cues to assist, when necessary. Another set of hands prevents delay and awkwardness. Prepare a basin of warm water with disposable or cloth washcloths in the water, and place any protective barrier cream container in the water to warm the ointment. When guiding someone to the toilet, remember Teepa's tip on gently directing the person to lean forward in preparation for sitting. Don't use any backward pressure that will put the person off-balance, cause resistance, and perhaps derail your efforts. Gently pat or wipe the area with the warm, soapy cloth and pat dry. Use a no-rinse soap to avoid the step of rinsing or leaving soap residue that can irritate. Squirt bottles filled with warm soapy water can be used to gently wash the area for someone upset by touch. Again, patting or blotting for soiled areas is much better tolerated than wiping.

For dried-on soiling, place a towel on the toilet seat and a warm, wet, soapy towel on top. The goal is to have the person sit for a few minutes to soften and clean the area without friction. Often this person has painful skin irritation. Change the pull-up by removing the old and putting the new one over the feet along with pants, shoes and socks so that it is one step to pull it all up when done. Pat dry, apply barrier cream, pants up, and hopefully finished! End with a happy song or distraction and avoid talking about the task completed.

Barrier creams and ointment protect the skin from the irritating properties of urine and stool and need to be used with every change after drying the skin to be effective.

In the case of persistent, irritated skin that is red and/or open tissue, call the doctor. Compounded creams that address individual needs are available for various common problems such as fungal infections, pain, or burning.

While what goes on *down there* isn't the most pleasant thing to talk about, it is important for prevention and comfort. Having a plan and being prepared can help make everything move more smoothly and be more comfortable for everyone. Hopefully these ideas will help!