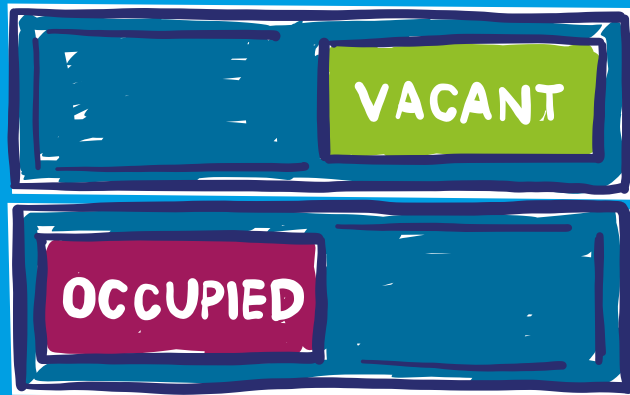


# Bladder and bowel problems

Common problems and  
how to manage them



# Information written with you in mind.

Our guides are produced with the help of older people, carers and expert peer reviewers.

Published: **December 2025**



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## What this guide is **about**

**People can experience problems with their bladder or bowel at any age. But as we get older, these problems can become more of an issue in day-to-day life.**

It can feel tricky to address bladder or bowel problems. Many of us don't feel comfortable talking about what we're going through or seeking help. But bladder and bowel problems aren't anything to be embarrassed about – and it's important to speak to your doctor if you're at all worried.



**All of the information in this guide applies in England.** This symbol indicates where it differs for Wales and Northern Ireland. If you're in Scotland, contact Age Scotland for advice.

This guide outlines common bladder and bowel problems and some of the things that can be done to cure, treat or manage them so they don't interfere with your everyday life.

Throughout the guide, we use the terms 'pee' and 'poo'. We understand everyone uses their own language for this kind of thing, and these terms might not be for everyone – but we've done some research and they were preferred overall.

**“Talking to my doctor  
was the first step towards  
sorting the problem.”**  
Brian, 82



### **Good to know**

Throughout this guide, we mention organisations that can offer further information and advice. Their contact details are in the 'Useful organisations' section at the back (pages 31-34).



# The bladder and the bowel

This section outlines how the bladder and the bowel work and some of the more common problems older people experience.

## How the bladder works

**The bladder is a muscular, balloon-shaped bag in the lower part of your body, supported by your pelvic floor muscles.**

Pee is made in your kidneys and gets stored in the bladder until it needs to be emptied. Your brain controls your bladder, automatically telling it when to hold on and when to empty.

A normal bladder:

- empties 4 to 7 times each day (every 3 or 4 hours)
- may wake you up once a night to pee
- can hold up to a pint of pee (between 500ml and 600ml), but usually feels quite full at about half this amount
- tells you when it's full but gives you time to find a toilet
- empties completely each time you pee
- doesn't leak accidentally.

## Types of bladder problem

Urinary incontinence is a loss of bladder control, which means you sometimes pee unintentionally. It's estimated that more than 3 million people in the UK experience urinary incontinence. It can be caused by different types of bladder problems.

### Urinary tract infections (UTIs)

If you have a UTI, such as cystitis, you're likely to experience sudden urges to pee, need to pee more often, and feel a burning sensation when you do go. UTIs can be painful but symptoms should clear up by themselves after a few days. If they don't, see your doctor.

### Urge incontinence

Urge incontinence is when you need to pee so suddenly that it's difficult to get to the toilet in time. You might also need to go more often than usual (known as 'increased frequency'), including at night.

Urge incontinence is often caused by an overactive bladder. As you get older, it's common to find that your bladder needs emptying more often and gives you less warning. This is normal – until it affects your everyday life or starts to cause incontinence. Then it's time to talk to a healthcare professional.

The reason for an overactive bladder is often unknown. You can be prone to urge incontinence if you have a condition that affects the nerves linked to the bladder, such as Parkinson's or multiple sclerosis.

### Nocturia

Nocturia is the need to get up to pee a lot during the night. If you're frequently up more than twice a night and it's disrupting your sleep or making you tired in the daytime, speak to your doctor, district nurse or practice nurse.

### Stress incontinence

Stress incontinence is when you pee a bit when you cough, sneeze, laugh or exercise – including gentle exercise such as walking. It's caused by a weak bladder outlet and weakness of the pelvic floor muscles that support it.

Men may develop stress incontinence after a prostate operation. However, stress incontinence is more common in women because the pelvic floor muscles, which support the bladder, uterus and large bowel, can be weakened during childbirth. This can lead to these organs slipping ('prolapsing'). After menopause, the body also stops producing the hormones that help keep the vagina and bladder outlet healthy.

Pelvic floor muscles can also be strained if you're overweight. Our **Healthy living** guide has information on maintaining a healthy weight.

It's possible to experience symptoms of both stress and urge incontinence (see page 7) – this is called mixed incontinence.

### Urinary retention

Urinary retention is when the bladder doesn't completely empty. Pee builds up and may overflow as a frequent, dribbling leak. You might feel like your stream is weaker than before, have difficulty starting to pee, or feel like you're not peeing out everything that's there.

There are several reasons your bladder might not fully empty.

- There may be a blockage or obstruction – such as an enlarged prostate gland.
- The muscles that empty the bladder may be weakened.
- If you're severely constipated, your bowel might be overfull and pressing on your bladder, reducing the amount it can hold.
- Surgery to part of your bowel or an injury to your spine may have damaged nerves to your bladder.
- You might be experiencing the side effects of some medication.



## Bladder problems in men

In the UK, 1 in 3 men over the age of 65 have a bladder problem. In men over 50, bladder problems can be a sign of an underlying prostate problem. If you notice any changes, such as a weaker flow of pee or difficulty with starting or stopping peeing, see your doctor as soon as you can. If you're worried about your risk of prostate cancer, it's important to mention your concerns.

If you notice any blood in your pee, or feel pain when you pee, you should also see your doctor as soon as possible.

**“I was getting up so often  
in the night – I knew it was  
time to talk to the doctor.”**  
Anne, 78



## Next steps

It's very important to see your doctor if you're having bladder problems. They can find out the cause and help you manage your symptoms.

Visit the NHS website (page 33) for more information about spotting bladder problems.

# How the bowel works

**The bowel is made up of the small intestine, colon and rectum.**

Food passes from the stomach into the small intestine, where the body absorbs nutrients. Any undigested waste moves into the colon, where fluid is absorbed and the waste becomes poo. When poo arrives in the rectum, we experience the feeling of needing to go to the toilet.

A normal poo is soft, easy to pass, and doesn't make you strain. You might need to poo several times a day or only once every 2 to 3 days (either can be normal).

## Types of bowel problem

**Many of us get constipated or have an upset stomach once in a while. However, if you're experiencing problems regularly or they're starting to affect your daily life, see your doctor.**

### Constipation

Constipation is a common bowel problem and happens when particularly hard poo becomes difficult to pass. It can be caused by:

- not eating enough fibre or 'roughage' (found in food such as wholemeal bread and cereals, fruit and vegetables)
- not drinking enough fluids (you should drink at least 6 to 8 cups a day – that's about 1.5 litres or 2.5 pints)
- not moving around much
- certain medicines (such as some painkillers)
- not being able to get to a toilet or putting off going (so the feeling that you need to empty your bowel goes away)
- some neurological diseases, such as Parkinson's
- bowel conditions such as irritable bowel syndrome (IBS).

## Diarrhoea

Diarrhoea is frequent, urgent, watery poo that can cause you to have an accident if you can't get to a toilet in time. Diarrhoea has many causes, including the overuse of laxatives, bacterial or viral infections, or conditions such as IBS, Crohn's disease or ulcerative colitis.

## Bowel incontinence

Bowel incontinence is when you can't control when you poo and you have accidents. Some people experience this every day, while others only experience it occasionally. It's usually a symptom of an underlying medical condition that affects the bowel – such as constipation, diarrhoea, multiple sclerosis or stroke.

Bowel incontinence can also be caused by muscle weakness or damage to the muscles that control the anus. Some women who experience muscle damage in childbirth can develop control problems later in life.



### Next steps

Constipation or changes in bowel habits that continue for more than 3 weeks or diarrhoea that lasts for more than a few days should always be reported to your doctor. Any bleeding should be reported immediately.

Visit the NHS website (page 33) for more information about bowel problems.



## Checking for bowel cancer

**Bowel problems can occur in people of all ages and aren't usually a sign of a serious problem. However, bowel cancer is more common in older people, and it's important to talk to your doctor if problems continue for more than 3 weeks.**

Bowel cancer symptoms can include blood in your poo, changes in your bowel habits, and lower abdominal pain, bloating or discomfort.

The NHS offers free bowel screenings between certain ages, based on where you live in the UK:

- In England and Wales, they're offered every 2 years to people aged between 50 and 74.
- In Northern Ireland, they're offered every 2 years to people aged between 60 and 74.

When you're eligible, you should automatically receive a letter with a leaflet explaining the process, then a test kit in the post a week later. This screening test can pick up signs of cancer before you experience any symptoms. Spotting cancer early means it's more likely to be treated successfully.

If you notice anything unusual in your bowel habits before you reach this age, or between screenings, don't ignore it – make an appointment with your doctor.

If you haven't received a kit, or you're 75 or over and would like a screening test, call the NHS Bowel Cancer Screening helpline (page 34).



In Wales, call Bowel Screening Wales. In Northern Ireland, call the Northern Ireland Cancer Screening Programmes.



### Next steps

Visit the NHS website (page 33) to find out more about bowel cancer screening and what the tests involve. In Wales, visit the NHS 111 Wales website and in Northern Ireland, visit the NI Direct website.

For more information about bowel cancer and spotting early warning signs, visit Bowel Cancer UK's website (page 32).



## Getting medical help

**You might not feel comfortable talking about your bladder or bowel problem. But it's nothing to be embarrassed about. Telling someone – especially a health professional – is the best way to get help.**

### Talking to a health professional

**Bladder and bowel problems aren't an inevitable part of getting older. You don't have to put up with them – and you certainly shouldn't have to face them alone.**

Talk about what you're experiencing with your doctor or other healthcare professional. They'll ask questions about your symptoms and might examine you. They'll then suggest possible treatments, exercises to tackle the problem, or other ways to minimise the effect on your everyday life. If you live in a care home, ask the manager to arrange an appointment with your doctor or the district nurse.

Alternatively, ask your GP surgery about your local NHS continence service. In some areas, you can refer yourself to this service – in others, you must be referred by a health professional.

Your doctor or continence service may also suggest a referral to a hospital specialist, who might want to carry out tests to help diagnose your problem.

**What will a health professional need to know?**

A health professional may ask you questions to help them understand how your bladder or bowel is working. We've left space for you to make notes here. It can also be a good idea to keep a diary of your bladder or bowel problems so you can provide some detail (see pages 16-17).

You might also be asked for a sample of your pee or poo, or have your bladder tested to see how full it gets before the urge to pee begins.

**When did your bladder or bowel problems start?**  
.....**How often does leaking happen? How much is lost?**  
.....**How are you dealing with it?**  
.....**How much, what and when are you drinking?**  
.....**Can you feel when your bladder or bowel is full?**  
.....**Have you noticed any other symptoms, such as discomfort?**  
.....**What medications (including over the counter and herbal supplements) are you taking?**  
.....

# Bladder or bowel diary

When you’re preparing for an appointment, it can be helpful to keep a bladder or bowel diary for 3 days so you can give more detail.

Use these pages to record:

- how much, what and when you’re eating and drinking
- how many times you use the toilet each day and night
- when you go to bed and get up in the morning
- how urgent the need to pee or poo is
- any instances of bladder or bowel leaking and what led up to them
- any other difficulties or symptoms
- any continence products you use.

## Day 1

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## Day 2

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## Day 3

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## Treatments for bladder and bowel problems

The solutions your doctor or other health professional suggest will depend on the type of problem you're experiencing. What works will vary from person to person, and sometimes more than one treatment will be needed.

Here are some common types of available treatment, in addition to the self-help measures on pages 20-26.

### Pelvic floor exercises

Pelvic floor exercises could help with stress incontinence and urge incontinence by strengthening the muscles around the bladder or bowel. A specialist nurse or continence physiotherapist can help you get the hang of these exercises. There's also equipment that can help if you find them difficult.

### Bladder or bowel training

Bladder training involves learning techniques to hold pee for longer so that you need to use the toilet less often and gain control of your bladder. These are best for people with urge incontinence.

Bowel training involves establishing a regular time to poo and stimulating your bowels to empty themselves.

**“My doctor gave me training techniques to use which really helped.”**

Diane, 73



## Medication

If lifestyle changes or training exercises aren't helping, you might be offered medication. Talk to your doctor or pharmacist about what medication might help your problem and what side effects there might be. You can also find more information about medications on the NHS website (page 33).

Often, medication is prescribed alongside recommended diet or lifestyle changes. See the next section of the guide for practical measures you could take to help yourself.

## Surgery

For some people, surgery may be an option if other treatments haven't worked. Your consultant or doctor should talk to you about the benefits and possible risks associated with surgery.



## Next steps

Visit the NHS website (page 33) for more information about incontinence, including treatments. In Wales, visit the NHS 111 Wales website or call the helpline. In Northern Ireland, visit the NI Direct website.

NICE (the National Institute for Health and Care Excellence) (page 34) produces separate guidance for women and men about what to expect from the NHS if you have bladder problems, as well as guidance for people with bowel incontinence.

# Things that might help

**While it's always worth talking about bladder or bowel problems with your doctor, there are things you can do yourself to reduce their impact on your daily life.**

It's OK if it takes a few tries to find out which changes are helpful. There's no one-size-fits-all approach – what matters is to do what works best for you.

## What can I do to help myself?

- If you're struggling with nocturia – the need to get up to pee more than twice during the night – try drinking less in the few hours before you go to sleep.
- Tea, coffee and fizzy drinks can make bladder symptoms worse. Cut down on these drinks or try decaffeinated versions. Alcoholic drinks or drinks with artificial sweeteners can also cause problems.
- Stopping smoking decreases your risk of bladder cancer and reduces coughing, which can put pressure on your pelvic floor.
- Maintain a healthy weight. Being overweight puts pressure on your pelvic floor muscles and can weaken them.
- Have plenty of fibre-rich foods and fluid to help avoid constipation.
- Staying active helps keep your bowel healthy. For tips on keeping fit and mobile in a way that works for you, see our guide **Healthy living**. Get in touch with your local council, Age UK or Age Cymru to find out what activities are available in your area.
- Ask your pharmacist or doctor whether any medications that you're taking could be disturbing the bladder. For example, water tablets (diuretics) make the bladder fill more often.



## Making life easier

**You might find your bladder or bowel problems stem from practical issues rather than medical ones.**

For example, you might find it hard to reach the toilet in time if you have difficulty walking. Or if your fingers are stiff, it can be tricky to get fastenings such as zips or buttons undone. In these circumstances, incontinence can be a problem if you need the toilet urgently. This is sometimes called functional incontinence.

If you're experiencing these sorts of problems, there are some practical measures you can take to make things easier.



### Good to know

If the underlying issue is medical, see pages 18-19 for information about possible treatments.

### Improving access to the toilet

If your incontinence is caused by difficulty getting around, a walking aid or stairlift might help you to get to the toilet in time. Freestanding or wall-mounted grab rails can make it easier to get on and off the toilet too. Adding a raised seat to the toilet can make it easier to sit down if you have joint problems.

Clothing can make a difference too. Wearing stockings rather than tights can help, for example, and full skirts can be easier to get out of the way than tight ones. Similarly, loose boxer shorts might be more manageable than Y-fronts. You could try clothing with elasticated waists – or adapt clothes so that they fasten with Velcro instead of zips and buttons.

### Alternatives to the toilet

If you can't reach the toilet easily, a commode might be useful. Many of them look like ordinary chairs with a lid. You can also get handheld urinals (both for men and women), which can be used when you're in bed or in a chair.

**“I started to worry about going to the toilet after I had a fall. Sometimes I just couldn't get there quickly enough.”**

**Rob, 83**



## Out and about

Try not to let having a bladder or bowel problem stop you from getting out and about. There are practical solutions to problems that might arise, and you can take spare pads and underwear out with you. Scented bags for soiled items are useful.

The Bladder and Bowel Community (page 32) offers a 'Just Can't Wait' toilet card so you don't have to queue if you're out and need to use a toilet quickly. It states clearly that the holder has a medical condition which means they need to use the toilet urgently. Visit the Bladder and Bowel Community website to download a free digital card or buy a plastic one.

You can also get a Radar key to unlock public disabled toilets that have been fitted with a National Key Scheme (NKS) lock. These toilets are often found in shopping centres, pubs, cafés and railway stations. Contact Disability Rights UK (page 33) for more information about Radar keys.

If you're going on a long journey with family or friends and know you'll need to use the toilet frequently, let them know beforehand. That way, you can plan extra stops so you won't have to worry.



## Next steps

For more advice on equipment that might help, speak to your district nurse or continence adviser or contact Living Made Easy (page 33).

For more ideas, see the '10 ways to stop leaks' section on the NHS website (page 33). In Wales, look up 'incontinence' in the Health A-Z section of the NHS 111 Wales website.

## Continence products

**Treatment doesn't always stop incontinence completely – but the right products can help you manage the problem and reduce its impact on your day-to-day life.**

To get continence products provided by the NHS, you'll probably need to meet criteria set out by your local NHS continence service. If you're assessed as eligible, you should receive a supply of continence products free of charge. Your local doctor or health professional will explain what type of products and devices are available.

You can buy many continence products in pharmacies and supermarkets – but you should seek professional advice before using them as a long-term solution. It's important to identify the cause of your problem as there may be treatment that can help.

Shop around before you buy as prices vary. Supermarkets and pharmacies won't charge you VAT on continence products – but if you're buying online or by mail order, you might need to fill out a VAT exemption form.

There's a variety of pads, pants and other products – although not all are available through the NHS. The following are unisex:

- washable products such as pads, which often come as part of a pair of pants
- disposable pads held in place by close-fitting pants
- disposable pants, or all-in-one pads with plastic backing and adhesive tapes to seal the sides – these are generally more suitable for heavy incontinence
- bed or chair protectors in the form of disposable or washable pads.



For men, there's also a range of products that fit over the penis and collect pee into a bag strapped to the leg. A penile sheath is the most popular version and is available on prescription – a dribble pouch is also an option.

In some situations, a catheter might be most suitable. For more information about catheters, contact the Bladder and Bowel Community (page 32).

If you're having problems with managing extra laundry, speak to your local social services to see if there's any help available in your area.

**“Now I've been assessed,  
I get my pads paid for.  
They used to cost me £20  
a week!”**  
Carol, 83



### Next steps

Continence Product Advisor (page 32) has an online tool to help you find out more about the range of products available and decide which type would best suit you.

## Personal hygiene and comfort

**Whatever continence products you use, there are some simple ways to keep yourself feeling clean and comfortable.**

### Avoiding smell

Fresh pee shouldn't smell unpleasant unless there's an infection – but it might start to smell if it's left for long periods. While good-quality pads help absorb some smell, it's a good idea to change wet items as soon as you're able. Keep wet clothes or sheets in a bucket with a lid until washed, and mop up any spills quickly.

While the smell from bowel incontinence can be more difficult to hide, changing soiled pads as soon as possible or putting them into an airtight container or sealed bag can help.

### Skin care

Washing regularly and drying yourself carefully with a soft towel helps to keep skin healthy. A balanced diet and plenty of fluids can help too. A health professional might also recommend you use a barrier product to protect your skin.

Change pads regularly. If your skin becomes red or sore, make sure that any pad or appliance fits properly and isn't rubbing. You could also check whether you've developed an allergy to something – for example, a washing powder or cream or part of a pad. If your skin becomes raw, consult your district nurse or doctor immediately, as this can lead to a skin infection or further skin breakdown.



## Additional support

**While there are things you can do to help look after yourself, there's also additional support available if you need it.**

### Social care and NHS services

**If you're having difficulty getting to or using the toilet at home, speak with your local council's social services department. They'll carry out a needs assessment.**

If you meet eligibility criteria, they can provide things like handrails in the bathroom or a commode. These products are also available to purchase. For further information, contact Living Made Easy (page 33).

If problems develop while you're in a care home, raise them with your doctor or district nurse, and ask that any long-term treatment (including eligibility for continence products) is added to your care plan.

If you have continence needs or develop problems while you're in hospital, these should be identified during your discharge assessment. Hospital staff should make sure these are addressed in the care plan and discharge plan they send to your doctor.

If you're found to be eligible for continence products, you shouldn't have to pay for them. The NHS should arrange for a supply to be delivered to you regularly.

If you're unhappy with the way your continence needs are being met by carers or by staff at your care home or hospital, you have the right to complain. Start by having an informal discussion with staff or the managers of the organisation providing your care. A family member or friend can support you or talk to staff on your behalf if you prefer.

If you feel your concerns still haven't been addressed, you might want to raise a formal complaint. The organisation must provide you with a copy of its complaints procedure on request.

For more information on the procedures for making complaints about a hospital or health service, see our factsheet **Resolving problems and making a complaint about NHS care**. For more information on making a complaint about care provided or arranged by social services, see our factsheet **How to resolve problems and complain about social care**. In Wales, see Age Cymru's versions of these factsheets.



### Next steps

If you'd like support with making a complaint about the NHS in England, contact your local Healthwatch (page 33) who can put you in touch with your local NHS Complaints Advocacy service. In Wales, contact Llais (page 33). In Northern Ireland, contact the Patient Client Council by calling **0800 917 0222**.

## Claiming benefits

If you have a physical or mental disability and you have difficulty getting about or need supervision or help when carrying out personal care, you might be eligible for Attendance Allowance (AA) if you're over State Pension age or for Personal Independence Payment (PIP) if you're under it. These benefits aren't means-tested, so you can claim them regardless of your income or savings.

Having continence issues won't necessarily mean you can get AA or PIP – but you might be eligible if you need help with things like getting to and from the toilet, using the toilet, remembering to go, or changing your continence pads.

For more information about who qualifies for disability benefits, see our guide **More money in your pocket**. Age Cymru and Age NI produce their own versions of this guide.

Go to [www.ageuk.org.uk/benefitscalculator](http://www.ageuk.org.uk/benefitscalculator) to use our online calculator and see what you might be entitled to. Alternatively, contact your local Age UK for a benefits check or help with making a claim. In Wales, contact your local Age Cymru.



### Next steps

To find out more about claiming AA, call the Attendance Allowance helpline (page 32). In Northern Ireland, call the Disability and Carers Service. To find out more about claiming PIP, call the Personal Independence Payment helpline (page 34). In Northern Ireland, call the Personal Independence Payment Centre.

# Dementia and incontinence

If someone has dementia, they may forget to go to the toilet or be unable to tell people when they need to go. They may not recognise the signs that mean they need the toilet, remember the way to the toilet, or recognise it when they get there.

If you care for someone with dementia, they might need regular, gentle reminders about using the toilet. If they forget where it is, a notice or picture on the door might help. A regular routine can also help. You might need to learn to recognise signs they need the toilet and encourage them to go.

If this doesn't help or you're having difficulties, talk to your doctor or district nurse.

**“My mum had trouble remembering where the loo was, so I popped a sign up on the door.”**

Rita, 52



## Next steps

See our guides **Caring for someone with dementia** and **At home with dementia** for tips on making the bathroom safer for someone living with dementia. Alzheimer's Society (page 32) offers advice for carers and people with dementia.

## Useful organisations

### Age UK

We provide information and advice for people in later life through our Age UK Advice Line, publications and website.

**Age UK Advice: 0800 169 65 65**

Lines are open 7 days a week from 8am to 7pm.

**[www.ageuk.org.uk](http://www.ageuk.org.uk)**

In Wales, contact Age Cymru Advice: **0300 303 44 98**

**[www.agecymru.wales](http://www.agecymru.wales)**

In Northern Ireland, contact Age NI: **0808 808 7575**

**[www.ageni.org](http://www.ageni.org)**

In Scotland, contact Age Scotland: **0800 124 4222**

**[www.agescotland.org.uk](http://www.agescotland.org.uk)**

### **Alzheimer's Society**

Offers advice, information and support to people with dementia, their families and carers.

Helpline: **0333 150 3456**

**[www.alzheimers.org.uk](http://www.alzheimers.org.uk)**

### **Attendance Allowance helpline**

Information about how to claim Attendance Allowance.

Tel: **0800 731 0122**

Textphone: **0800 731 0317**

### **Bowel Cancer UK**

Provides support to everyone affected by bowel cancer.

Tel: **020 7940 1760**

**[www.bowelcanceruk.org.uk](http://www.bowelcanceruk.org.uk)**

### **Bladder and Bowel Community**

Provides a range of information and resources for people with bladder and bowel problems.

Email: **[help@bladderandbowel.org](mailto:help@bladderandbowel.org)**

**[www.bladderandbowel.org](http://www.bladderandbowel.org)**

### **Continence Product Advisor**

Website offering independent advice about continence products.

**[www.continenceproductadvisor.org](http://www.continenceproductadvisor.org)**

### **Disability and Carers Service**

Provides information on how to claim Attendance Allowance in Northern Ireland.

Tel: **0800 587 0912**

Textphone: **0800 012 1574**



## Disability Rights UK

Operates a National Key Scheme that offers people with disabilities independent access to locked public toilets.

**[www.disabilityrightsuk.org](http://www.disabilityrightsuk.org)**

## Healthwatch

In England, local Healthwatches provide information, advice and support to users of health services in the area.

Tel: **03000 683 000**

**[www.healthwatch.co.uk](http://www.healthwatch.co.uk)**

## Living Made Easy

Helps older and disabled people live independently at home. Provides advice on equipment such as commodes and urinals.

**[www.livingmadeeasy.org.uk](http://www.livingmadeeasy.org.uk)**

## Llais

Provides advice and support in Wales for people who have concerns about NHS or social care services in their area. Complaints advocacy staff can support you to make a claim.

Tel: **02920 235 558**

**[www.llaiswales.org](http://www.llaiswales.org)**

## NHS

Provides information about health conditions, treatments and services in England.

**[www.nhs.uk](http://www.nhs.uk)**

In Wales, visit **[NHS 111 Wales](http://111.wales.nhs.uk)**

**[111.wales.nhs.uk](http://111.wales.nhs.uk)**

In Northern Ireland, visit **[NI Direct](http://www.nidirect.gov.uk)**

**[www.nidirect.gov.uk](http://www.nidirect.gov.uk)**

### **NHS Bowel Cancer Screening helpline**

Call for more information about bowel screening in England.

Tel: **0800 707 60 60**

In Wales: **Bowel Screening Wales**

Tel: **0800 294 3370**

In Northern Ireland: **Northern Ireland Cancer Screening Programmes**

Tel: **0800 015 2514**

### **NICE (National Institute for Health and Care Excellence)**

Provides guidance on being healthy and treating conditions. Note that the information in these documents about treatment available on the NHS only applies in England and Wales.

You can download:

- Urinary incontinence and pelvic organ prolapse in women
- Lower urinary tract symptoms in men: management
- Faecal incontinence in adults: management

**[www.nice.org.uk/guidance](http://www.nice.org.uk/guidance)**

### **Personal Independence Payment helpline**

Information about how to claim Personal Independence Payment.

Tel: **0800 917 2222**

Textphone: **0800 917 7777**

In Northern Ireland: **Personal Independence Payment Centre**

Tel: **0800 012 1573**

Textphone: **0800 587 0937**

# Help us be there for someone else

We hope you found this guide useful. When times are tough, it's so important to get some support. You can help us reach everyone who needs us:

1

**Tell us your story.** If Age UK's information and advice has helped you, we'd love to hear about it. Email [stories@ageuk.org.uk](mailto:stories@ageuk.org.uk).

2

**Donate to us.** We rely on donations to support older people when they need us most. To make a donation, call us on **0800 169 8787** or go online at [www.ageuk.org.uk/donate](http://www.ageuk.org.uk/donate).

3

**Volunteer with us.** Our volunteers make an incredible difference to people's lives. Find out more at [www.ageuk.org.uk/volunteer](http://www.ageuk.org.uk/volunteer) or contact your local Age UK.

4

**Campaign with us.** We campaign to make life better for older people, and rely on the help of our strong network of campaigners. Add your voice at [www.ageuk.org.uk/campaigns](http://www.ageuk.org.uk/campaigns).

5

**Remember us in your will.** A gift to Age UK in your will is a very special way of helping older people get expert support in the years to come. Find out more by calling **020 3033 1421** or visit [www.ageuk.org.uk/legacy](http://www.ageuk.org.uk/legacy).

# What should I do now?

You might want to read some of our relevant information guides and factsheets, such as:

- **Getting help at home**
- **Advice for carers**
- **Healthy living**

You can find all of our guides and factsheets on our website, along with lots more useful information. Visit **[www.ageuk.org.uk](http://www.ageuk.org.uk)** to get started.

You can order free printed copies of any guide or factsheet by emailing **[orders@ageuk.org.uk](mailto:orders@ageuk.org.uk)** or calling our Advice Line on **0800 169 65 65**. Our friendly advisers can also help with any questions.

All of our publications are available on request in large print and audio formats.

If contact details for your local Age UK are not in the below box, call Age UK Advice free on **0800 169 65 65**.



**0800 169 65 65**  
**[www.ageuk.org.uk](http://www.ageuk.org.uk)**



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