

## **Views From the E-List\* – Incontinence, Swim Diapers, and Health Issues**

### **Query:**

We are looking to update our policies and procedures for aquatic therapy. I was wondering if anyone had any references or information about incontinence issues and use of swim diapers? Thank you.

### **Responses:**

When several swim diaper and outer diaper scenarios were actually tested by Dr. James Amburgey (2008 World Aquatic Health Conference). Dr. Amburgey tested disposal, reusable, disposable with and without vinyl diaper cover. When a person is moving around in the water, there were NO scenarios that "contain" feces. Here's the abstract:  
[http://www.nspf.org/WAHC\\_Seminars/WAHC2008/Amburgey.html](http://www.nspf.org/WAHC_Seminars/WAHC2008/Amburgey.html).

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Though a fecal accident is gross, if the patient does not have cryptosporidiosis then the risk of infection from pathogens is lower since proper chlorine levels and pH is maintained. These disinfectants will inactivate most pathogens quickly (other than crypto). The CDC is the world expert on fecal accident response; NSPF did fund some of their research. If in doubt, adopting the CDC fecal accident response guidelines is a sound strategy. Here's the link:

[http://www.nspf.org/Documents/cdarticles/Fecal\\_Incident\\_Response\\_Recommendations\\_for\\_Pool\\_Staff.pdf](http://www.nspf.org/Documents/cdarticles/Fecal_Incident_Response_Recommendations_for_Pool_Staff.pdf)

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Poop in a pool -- that age-old problem -- surfaces again. Ever since the dawn of time when man scooped out his or her first depression in the soil to accumulate water and then bathe, the question of sanitation included how to avoid and/or deal with, poop in the pool. Any poop in any pool at any time is not a good thing. Poop in the pool is to be avoided at all cost. There are several sure ways to avoid poop in the pool --

1. Stay out of a pool.
2. Stay out of a pool when there is any possibility you could poop in the pool (as in when you have intestinal flu/diarrhea).
3. Wear a dry suit -- the type of suit that will not let in any water -- like those worn for cold water scuba.(If water cannot get in, bacteria in pool cannot get out.)

That's it, that's all there is.

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At our facility, the majority of my patients are incontinent. Once they have been admitted and we decide to get them into the pool we watch their bowel and bladder schedule for a couple of weeks. At that point we try and find a time for them in the pool that works with that schedule. Everyone wears swim diapers and jammers if there is any question about continence. There have been "accidents". When that happens we shut the pool down, shock it and keep it closed for 24 hours. If a patient has diarrhea, they cannot get back into the pool until it has been two weeks since their last episode. This weekend Ruth told me about containment briefs. These will keep accidents 100% contained, where as the swim diapers we have been using have only been 20%. They are available from Aquagear.com. They are expensive, however, it is what we will be recommending from now on. Hope this helps.

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Wearing a diaper/rubber pants, etc. is not a solution. Yes, in the past we in aquatics did advocate for the diaper rubber pants "plan". Current swim diaper ideas stemmed from this concept. However, if water can get in, bacteria can get out. Poop carries the type of bacteria that can be very nasty!!! That bacteria has always posed a risk. However, as contagion risks to a variety of diseases have changed and increased over the past decades, so has the bacterial content potential of poop.

There are always some fecal bacteria gets into pools. How do I know? How many people take a nude soap shower (including THOSE parts) prior to putting on a swim suit fresh from the laundry before entering the pool? Humm. . .interesting question. Skid marks on underpants are an example of possibilities.

How much bacteria can your filter system handle? What types of bacteria can your system handle? What is your risk? What is the risk to your clients, especially those who may be health compromised? How can you be absolutely SURE. Now it's time to go back to the beginning of this message.

Or, try the CDC website (their Healthy Swimming newsletter) for more information. Or, Google for water borne infections. The information is readily available. But, I'm not sure we (myself included) always want to hear the word on safest path.

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Accidents can happen in any pool at any time. In this day and age knowingly allowing someone with fecal incontinence into the pool isn't an "accident". What water conditions do you want to swim in? What risk are YOU willing to take with YOUR health? That's the poop on poop.

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The same for our pool, most are incontinent. We have tried to make accommodations for their usual toileting schedules,

but it's very difficult. For any loose stool accident, we follow the same procedure and shut the pool down, superchlorinate it and close it until the next day. We can do that, because we're private and no one else uses it. Our pool director decided that a child has to have be cleared from any diarrhea for 3 days before they are using the pool. Did you make your decision for the two-week period based on a specific research article? Please share if you have it.

We are using briefs as well, but when it is diarrhea how can it contain anything...it's watery?

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The Aquatic Therapy Journal published two very detailed articles relating to incontinence.

Skaros, S. et. al (2006). Somas, Ostomies, and Appliances: Implications for Aquatic Therapy. 8(2), 3-10, September.  
Huber, J. (2007). Guidelines for Ostomates: Ensuring Successful Aquatic Experiences. 9(1), 3-9, March.

Back issues are available from the Aquatic Exercise Association, info@aeawave.com. ATRI also has some back issues available.

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FYI: According to an article in JAMA (August 20, 2008; Vol 300, No. 7, page 786; "Notice to Readers: Revised Recommendations for Responding to Fecal Accidents in Disinfected Swimming Venues" the Centers for Disease Control has revised their recommendations for handling fecal accidents (poop) in swimming pools. These recommendations are based on the potential presence of chlorine-resistant parasitic protozoa of Cryptosporidium. Details are in the article, as well as on the CDC website at

[http://www.cdc.gov/healthyswimming/pdf/fecal\\_accident\\_response\\_recommendations\\_for\\_pool\\_staff.pdf](http://www.cdc.gov/healthyswimming/pdf/fecal_accident_response_recommendations_for_pool_staff.pdf)

The short version is that pool closure time following a fecal accident should be longer to ensure inactivation of Crypto. How much longer is in the details.

Operators are also reminded to check local guidelines because CDC recommendations do not replace local or state regulatory agency statutes.

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*\*Opinions and suggestions expressed in this column represent e-list member responses to the query posted. They are not represented by the Aquatic Therapy and Rehab Institute and/or the author(s) of this column as recommendations regarding appropriate practice.*