

CHAPTER 5

Taking care of your body



Some people think having a disability means you are sick. This is not true. But having a disability may mean you need to take more care in your daily routines to stay healthy.

As a disabled woman, you know and understand your body better than anyone else. For example, you know you may not rely on pain to tell you something is wrong—you need to check your body carefully and regularly every day, especially the parts you cannot feel or see. Or if you have an unusual feeling, or body reaction, or a pain somewhere, or any sores or illnesses, you try to find out as soon as possible what might be causing it. When it is necessary, you ask a family member, friend, or someone you trust to help you.

This chapter has information to help you stay healthy and prevent many health problems. If you need assistance with daily care, this chapter has information to help your family and caregivers to provide that assistance.

Eat well for good health

All women need good food to do their daily work, to prevent illness, and to have safe and healthy births. But not eating well (poor nutrition) is the most common and disabling health problem among women in poor countries. When food is not shared equally within a family or a community, it is usually women, especially disabled women, who do not get enough.

Starting in childhood, a girl is often given less food to eat than a boy. As a result, she may grow more slowly, her bones may not develop properly, and this can cause a disability later in life. For a girl who was born with a disability, it can make her disability worse. Also, when a woman who does not get enough to eat (is malnourished) becomes sick, she is more likely to have serious complications.



For better health, everyone in the family, including girls and women with disabilities, needs enough good food.

A healthy diet

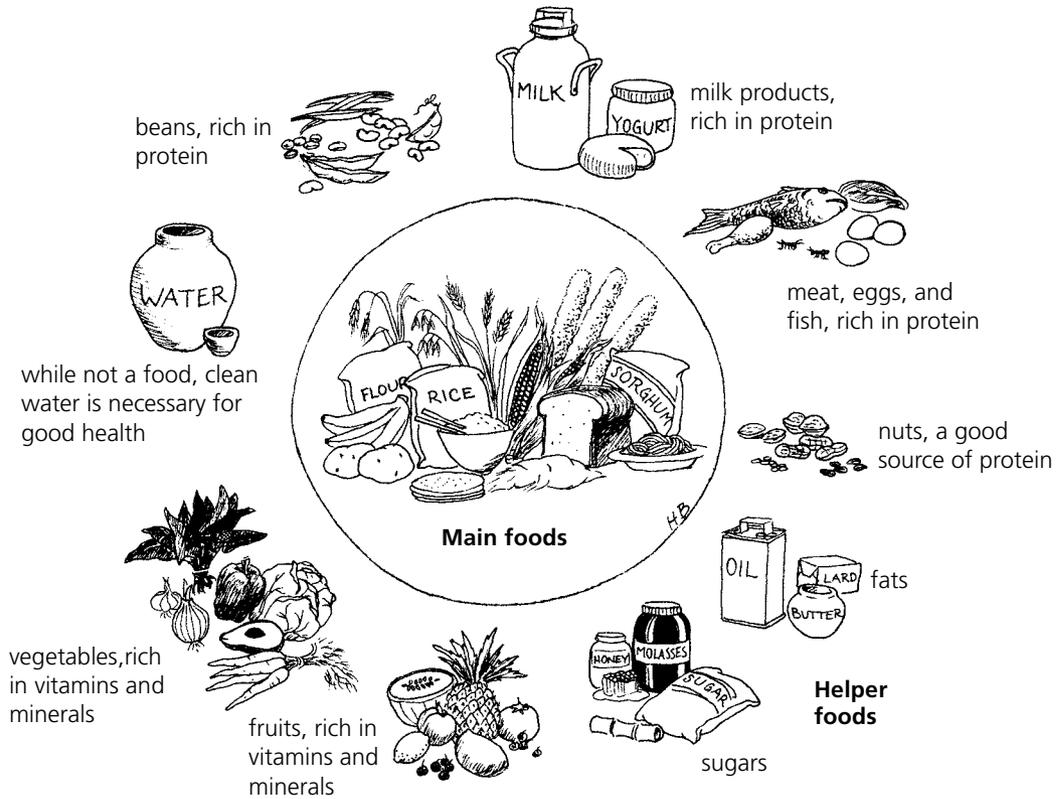
You do not need to eat all the foods on page 87 to be healthy. You can eat the main food you are accustomed to, and if possible, add as many of the other foods as are available in your community. Foods with protein are especially good for keeping skin and muscles strong, and foods with calcium (milk and milk products, green leafy vegetables, soy beans, and shellfish) are especially good for keeping bones strong.



The health worker told me I should drink more milk and eat green leafy vegetables. But I save all our milk for my husband and son, and we don't have the money to buy fresh vegetables.

Here are some suggestions:

- a main low-cost food, such as rice, maize millet, wheat, cassava, potato and others.
- some foods with protein from an animal, such as milk, yogurt, cheese, eggs, fish or meats (which help build the body).
- other sources of protein, such as beans, lentils, seeds, nuts, seaweed, soy.
- fruits and vegetables rich in vitamins and minerals (which help protect and repair the body).
- and a small amount of fats and sugar (which give energy).



Prevent anemia (weak blood)

Without enough good food, any girl or woman can suffer from general poor health, and she may also suffer from anemia. This happens when you do not eat enough foods rich in iron. Anemia is very common among women, especially pregnant and breastfeeding women. It causes extreme tiredness, and lowers a woman’s resistance to infection and disease. Heavy bleeding during childbirth can also cause anemia, as can malaria and hookworm. (Talk to a health worker about how to prevent or treat malaria. Hookworm can be easily treated with mebendazole, see page 346).

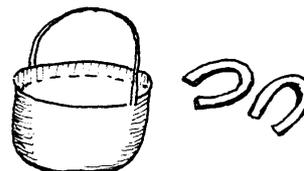
Signs of anemia include:

- pale inner eyelids, nails and inside of lip
- weakness and feeling very tired
- dizziness, especially when getting up from a sitting or lying position
- fainting (loss of consciousness)
- shortness of breath
- fast heartbeat

To both prevent and treat anemia, try to eat foods rich in iron every day, such as dark green leafy vegetables (edible hibiscus leaves, spinach, drumstick leaves, taro leaves, cassava leaves) and also eggs and milk, raisins, molasses, and meat.

It is possible to get even more iron if you:

- eat iron-rich foods together with tomatoes or fruits such as mangoes, papayas, oranges, lemons, and limes. These all contain vitamin C, which helps your body use more of the iron in the food.
- cook food in iron pots. If you add tomatoes, lime juice, or lemon juice to the food while it is cooking, more iron from the pots will go into the food.
- add a clean piece of iron—such as an iron nail or a horseshoe—to the cooking pot. **Make sure that these are made of pure iron**, not a mixture of iron and other metals. Some metals, like lead, are harmful and cause birth defects.
- put a clean piece of pure iron, such as an iron nail, in a little lemon juice for a few hours. Then make lemonade with the juice and drink it.



In many places, health centers will give iron pills (ferrous sulfate) to pregnant women to prevent anemia.

Keep your body moving

All women need exercise to keep their bodies strong, flexible, and healthy. Exercise helps your muscles, your heart, and your lungs stay strong, and it helps prevent you from getting high blood pressure, weak bones, and constipation. Exercise will also help prevent you from becoming too fat. To be very fat is not healthy and will make all of your daily activities more difficult.

Sometimes a woman's disability does not let her use or move her body, or parts of it, well enough to get the exercise she needs. Muscles that are not used regularly become weak or can develop spasms. Joints that are not moved through their full range of motion get stiff and can no longer be completely straightened or bent. If you have a disability that affects your body, make sure to move all the parts of your body through their full range of motion. Sometimes you may need help with this.

Exercise can also help women who feel depressed. Some kinds of exercise can actually help you feel less pain. Many people sleep better if they exercise regularly. When your body is strong and healthy, you have more energy, feel better, and hurt less.

Most women get all the exercise they need through ordinary daily activities, such as preparing and cooking family meals, cleaning, working in the fields, collecting wood and water, and carrying children. As much as possible, women with disabilities can get their exercise in these same ways.

If it is very difficult for you to move your body, try to change your position often. If you usually sit all day, change your position by lying down for a while.



If you are often bent forward...



...try to stretch the muscles in your chest.

Exercise does not have to be hard work in order to be good for you. It is best to start slowly, especially if you do not move much now, or if you cannot move a part of your body, if it is weak or painful, or if you spend a lot of time in the same position. Not moving much can make joints and muscles stiff and painful, or can make the body freeze in a certain position. As your body gets more used to moving, you will be able to do more.

EXERCISE CAN BE FUN

Try to find exercise that is fun. Some women like to ride a donkey or burro. Controlling the animal, moving your body to respond to its movements, and keeping your balance are all forms of exercise.

Try to exercise with another person. You are more likely to keep exercising when you are also spending time with a friend. It is also good to have another person who can give help if you need it.

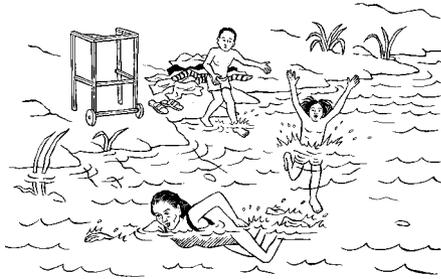


Some women enjoy dancing...



...or playing a sport.

For many women with disabilities, swimming and moving in the water is a very good way to exercise. Because your body weighs less in the water, women who have a hard time moving or walking can often move better in the water. Or they have less pain in the water. Swimming is the best exercise for someone with arthritis.



Make sure the water is not too cold. Cold muscles can get hurt more easily.



Lifting heavy objects over and over again can help make your muscles and bones strong.

If you use a wheelchair, try to push it around your community by yourself.

If this is not possible, try lifting objects (such as rocks, cans of food, or a bottle filled with water) over and over again. This will help keep the muscles and bones in your shoulders and arms strong.

How to lift: Before you lift, sit up as straight and tall as you can. Take a deep breath in, and then out. As you blow out, pull your shoulder blades back toward your spine as you lift the object. Take another deep breath in as you hold the object, and then blow out as you lower the object back down slowly.

STRETCH YOUR MUSCLES

Stretching your muscles makes them more flexible, so you can bend and move more easily. For many women with disabilities, stretching regularly means they feel less pain. Stretching also helps prevent injuries.



Always stretch before you begin hard work or exercise. Stretching and starting gently will help keep you from hurting yourself and hurting your muscles. It is also a good idea to stretch after doing exercise or hard work. Stretching can also help keep your body flexible, and prevent pain and weakness as you grow older.

To stretch a muscle:

1. Find a position where you feel secure and are not likely to fall. The stretch should be gentle. It should not hurt. For example, to stretch your lower back, lie down on a mat with your face up. Bend your knees and pull both legs toward your chest as far as you can without causing pain.
2. Hold your body in this position, while you count slowly to 30 (or count to 10 three times). Do not bounce or move your body back and forth.
3. Remember to breathe while you are stretching. If the stretch starts to hurt, try moving the part you are stretching so that the stretch is more gentle. If this does not stop the pain, try a different position.

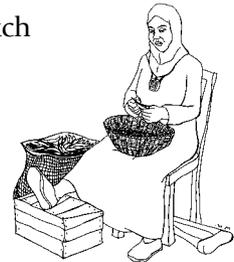


Women with limited movement may have to experiment to stretch certain muscles. Sometimes, you may need another person to help you. If someone else helps you stretch, make sure they move the muscle slowly. Then, you can tell them to stop when you feel a stretch.

Some people like to put ice, or a warm cloth or towel, or a heat pack (if available) on their muscles before stretching. You can try this yourself to see if it makes your body feel better.

Many women with tight muscles stretch every morning before they start the day's work, so they do not hurt as much during the day. At night, they stretch again to help sleep better and to have less pain after a long day.

Other women find they can stretch a muscle while doing some other task. If you can, find ways to include stretching in your everyday activities.



Sana's leg is paralyzed from polio. While she prepares food, she stretches her leg to prevent it from getting locked into one position (a contracture).



Maria has cerebral palsy. She is stretching her muscles at the same time as she is doing her daily work. The rock keeps her legs apart, allowing her to stretch the muscles inside her legs while she works. This helps to prevent muscle spasms. She keeps her back as straight as she can while she stretches her arms, legs and neck.

If you have tight muscles, paralysis from cerebral palsy or a spinal cord injury, or joint pain

Women who have painful joints or tight (spastic) muscles should be careful with exercises such as running or lifting heavy things. These kinds of exercises can put too much stress on the muscles and joints. They can hurt your muscles instead of making them stronger.

Relaxing tight (spastic) muscles

Women with cerebral palsy, multiple sclerosis, or spinal cord injuries often have muscles that are very tight and stiff (spastic muscles). A muscle may get very stiff or shake, and the woman may not be able to control how it moves. To help with tight spastic muscles:

- Do not pull or push directly against the spastic muscle. That makes it tighten more.
- Do not massage spastic muscles. Rubbing or massaging spastic muscles usually makes them tighter.
- To manage spastic muscles, find a position that helps the body relax. Rolling or twisting gently from side to side can help. Sometimes, moving a different part of the body will help ease the spastic muscles. You can also use warm cloths (wet or dry) to help relax spastic muscles.

If you use a wheeled cart, crutches, or wheelchair

If you use a wheeled cart, crutches, or wheelchair, you may start to have trouble with your shoulders or wrists because of using your arms so much. Your arms and shoulders can hurt and wear out more easily. To help prevent this, stretch your arms and shoulders often. For example:

Women who use wheelchairs often have strong arms. But it is important to keep all the muscles in the arms and shoulder strong, not just the muscles you use to push your chair.

To prevent overusing your arms and shoulders, try not to do the same thing for a long period of time. For example, change or alternate how you pick things up. First use your left hand, then the right.

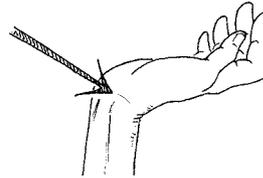
A good way to strengthen the other muscles in your shoulders is to push your wheelchair backward.



Injuries from overuse

Joints are places in the body where bones come together. At these joints, tendons connect the muscle to bones. If you repeat the same movement over and over again, such as pushing your wheelchair or cart, or walking with crutches, the tendons in your wrists can be damaged.

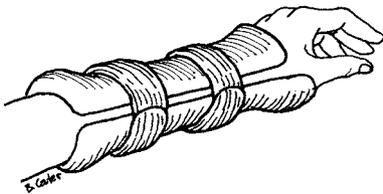
You will feel pain in your hand, or here,



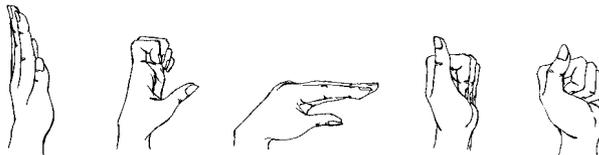
Treatment:

- **Rest:** Rest your wrists and hands in a comfortable position as much as possible. If you must continue to move or push yourself around, wear a splint to keep your hands and wrists as still as possible.

- **Splint:** To make a soft splint, wrap your wrist and lower arm with cloths so the joint does not move. Wrapping the cloth around a thin piece of wood first can help keep the joint straight. The cloths should be wrapped tightly enough to keep your wrist from moving, but not so tightly that the blood flow is blocked or the area gets numb. If you can, wear the splint while you are moving around, and also while you rest or sleep.



- **Water:** Fill one bowl with warm water, and one bowl with cold water. Place your hands and wrists in the cold water for one minute, and then in the warm water for 4 minutes. Do this 5 times, ending with the warm water, at least 2 times a day (more often if you can). The warm water bowl should always be the last one your hands go into.
- **Exercise:** After each water treatment, exercise your hands and wrists. This will help prevent more damage to the tendons. Count to 5 as you hold your hands in each of these positions. If you feel pain in any of these positions, try to change the position a little to make it more comfortable. Repeat these movements 10 times.



- **Medicine:** If your hands or wrists are painful or swollen, take aspirin or another pain medicine that reduces inflammation (see page 335).
- **Operation:** After 6 months, if the pain is constant, if you feel weaker, or if you lose feeling or notice tingling in your hands, get medical help. You may need to have medicine carefully injected into the wrist, or you may need an operation.

Prevention:

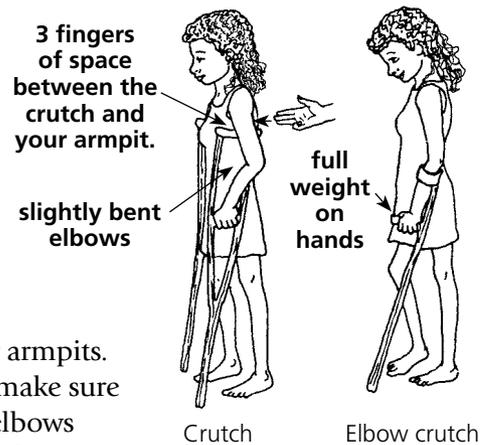
- If you can, try to push or move yourself in a way that bends your hands and wrists less and puts less pressure on them.
- If possible, ask someone else to push your wheelchair or cart from time to time, to give your hands and wrists a rest.
- Try to exercise your hands and wrists every hour, by moving them through all of the motions they can make. This will stretch and strengthen the tendons and muscles. If exercise causes pain, move slowly and gently.

If your hands and wrists are red or hot, they might be infected. See a health worker right away.

Using crutches

If you want to use crutches, make sure they fit properly. When you use crutches, most of your body weight will be felt in your hands. So follow the advice on page 93 to prevent damage to your hands.

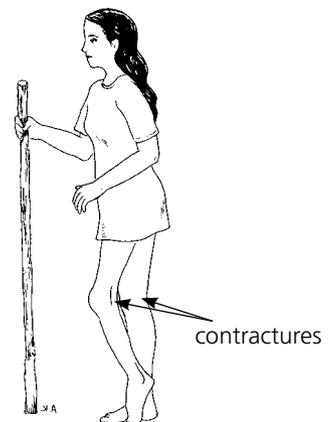
If possible, always use elbow crutches to prevent possible damage to the nerves in your armpits. But if you prefer or can get only tall crutches, make sure they do not press up into your armpits. Your elbows should be slightly bent, and there should be 3 fingers of space between the crutch and your armpit. If tall crutches press up under your armpit, in time the pressure on the nerves there can cause paralysis of the hands.

**CONTRACTURES**

An arm or a leg that has been bent for a long time can get locked into one position (a contracture). Some of the muscles become shorter and the arm or leg cannot fully straighten. Or short muscles may hold a joint straight so that it cannot bend. Sometimes contractures cause pain.

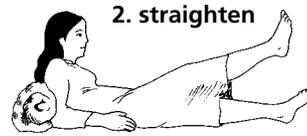
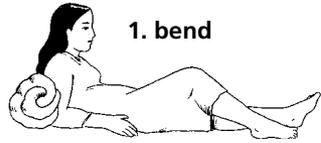
If you have had contractures for many years, gentle movement and stretching can prevent the joint from getting worse. It will be difficult to straighten the joints and muscles all the way. But gentle exercises can make your joints a little less stiff and keep your muscles strong.

To prevent contractures and keep your muscles strong, try to exercise your arms and legs every day. If necessary, find someone who can help you move different parts of your body.

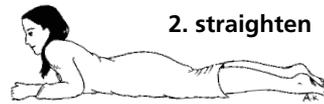
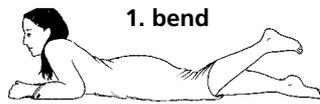


Examples of exercises that prevent some contractures and help keep muscles strong

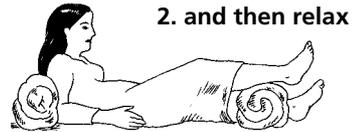
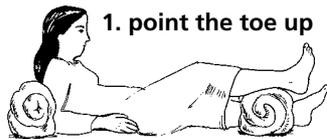
To exercise the front of the upper leg



To exercise the back of the upper leg

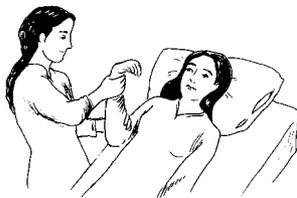


To exercise the lower leg

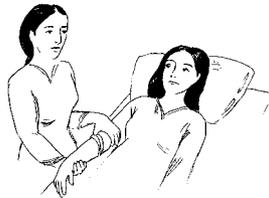


To exercise the arms

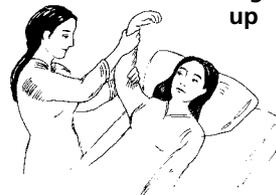
bend



straighten



lift straight up



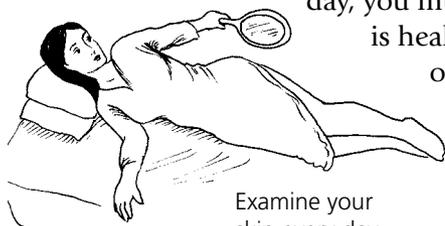
IMPORTANT If a joint has been bent for a long time, be gentle. Do not try to force it straight.

Preventing common health problems

Because you know and understand your body better than anyone else does, you can teach your family members, friends, and caregivers how they can best help you. Do not be afraid or ashamed to ask them for assistance if you have a problem. Although it is not always possible to prevent illness, most health problems will not become serious if they are treated early. If possible, try to get regular health exams (see Chapter 6).

DAILY CARE

You can stay healthy and prevent infections by washing your body every day and checking your skin regularly. If you sit or do not move very much for most of the day, you must be extra careful to check your skin to make sure it is healthy (see pages 114 to 117). Look for swelling, redness, or other signs of infection. If you find scratches, cuts, or sores, wash and cover or bandage them so they do not get worse. You can use a mirror to help you look at hard-to-see places. Many blind women learn to check for sores or other warning signs by smell or by touch.



Examine your skin every day.

Wash your hair regularly, and check it often for lice. Also check the skin on your head for wounds or scabs. And try to wear clean clothes every day, especially your underclothes and socks.

Some women with disabilities have to pay attention to “minor” signs to tell when they have a health problem. For example, a woman who has an infection in her womb may not be able to feel pain from it. But she may notice an unusual discharge or smell from her vagina. A blind woman may not see that a cut is becoming a serious infection. But she may be able to feel some pain and swelling.



A change in the smell of the discharge from your vagina can mean you have an infection.

CARE OF THE FEET AND HANDS

If you do not have much feeling in your feet and hands, be careful to protect them. Look for cuts and sores every day. It is easy to burn your feet or hands if you cannot feel them. Or you may get a sore or cut without feeling it. If you find a sore or a cut, keep it clean and covered until the injury has healed.

Protect the parts of your body that cannot feel heat or cold. Protect your hands with thick gloves or a folded cloth while picking up anything hot. And if you live where the weather gets very cold, cover your hands and feet to protect them.

Use a small mirror to see the bottoms of your feet.
Or ask someone else to help you. Look for:

- redness, swelling, hot skin, or other signs of infection.
- cracks, sores, or broken skin.
- pus, bleeding, or bad smells.
- ingrown toenails (the edge of the nail is stuck inside the skin).

If you feel pain, tingling, burning, or have no feeling (numbness) in your feet, talk with a health worker. You may have an infection and need medicines to make it heal.



To help prevent infection, wash your feet every day with soap and warm water. First, check the water temperature with your elbow where you have more feeling, or ask someone with good feeling to check that it is not too hot for you. Dry your feet well especially between the toes.

If the skin on your feet gets dry or begins to crack, soak your feet in water for 20 minutes every day. Then rub vegetable oil, petroleum jelly (*Vaseline*), or lotion into them.

Other ways to protect your feet:

- Do not go barefoot.
- Cut your toenails straight across, not rounded, so they will not grow into your skin (ingrown toenail). And do not let them get so long that they catch and tear. Ask someone to help you if necessary.
- Make sure your shoes fit well and do not rub the skin and cause blisters or red areas.
- Check inside your shoes before you put them on for things that could irritate your feet, such as small rocks, thorns, dirt, or insects.
- Do not sit with your legs crossed. This makes it harder for the blood to flow to your feet.
- Do not cut corns, calluses, or hard skin from your feet. This can lead to an infection.
- Wear socks. Make sure socks are smooth and do not rub against your feet. If you need to mend holes in your socks, try to make the stitches very smooth.
- In hot climates, try to sit with your feet uncovered as often as possible during the day. This helps your blood circulation and helps prevent skin infection between your toes.

Women with leprosy (Hansen’s disease) must take special care to protect their feet from injury and infection. Because leprosy causes a loss of feeling in legs and feet, women who have leprosy are less likely to feel pain, itching, or other signs of a problem when it is still small and easy to treat.

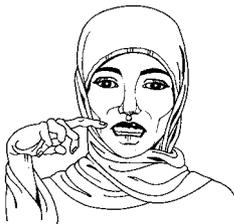
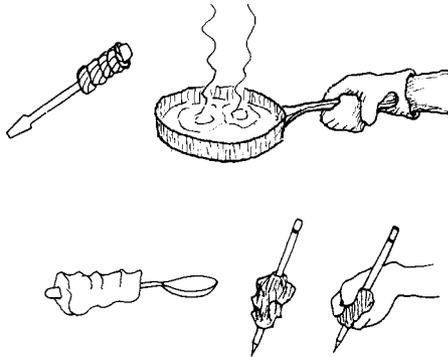
Women with leprosy often have a hard time holding things. To make it easier to hold onto things and prevent injuries, use or make tools with wide, smooth handles, or wrap thick cloth around the handles.

To make a handle:

You can mold a handle to the shape of the person’s closed hand.

Use epoxy putty, or plaster of paris mixed with a strong glue. Have the person grip the handle while it is still soft. Then let it harden.

You can also make a handle with clay, or wrap several layers of thick leaves, such as banana leaves, or corn husks around the handle.



Sometimes dentists refuse to care for people with cerebral palsy. But it is very important that all people get good care for their teeth.

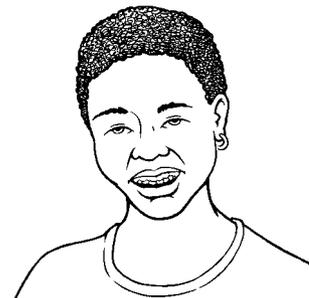
CARE OF THE MOUTH AND TEETH

Women who have a hard time controlling or moving the muscles in their mouth and tongue, or their hands and arms, such as women with cerebral palsy, may find it difficult to clean their teeth and gums. But if teeth are not cleaned regularly, any food that sticks to them or the gums can cause decay. If necessary, ask someone you trust to help you.

Women with epilepsy (seizures, “fits”)

If you use the medicine phenytoin (diphenylhydantoin, *Dilantin*) to prevent seizures, it can cause your gums to swell and grow large. Taking good care of your mouth can prevent much of the swelling.

Try to clean your teeth carefully after each meal and rinse your mouth with clean water. Take special care to clean between your teeth. It also helps to massage your gums with a clean finger.



Medicine for epilepsy can make gums swollen and sore, almost covering the teeth. Keeping your teeth clean can help prevent this.

Toothpaste is not necessary to clean your teeth. Some people use baking soda or salt instead. If you have a toothbrush, it is the brush hairs that do the cleaning, so water on the brush is enough. Use a brush with soft hairs. A brush that is stiff and hard will hurt the gums, not help them. Be careful if you use a chewing stick. Some wood is very hard and can hurt and damage the gums. The soft wood from the neem tree (which grows in many hot countries) works well. You can also wrap clean cloth around the pointed end of a small stick or toothpick and use it to carefully clean the teeth one at a time.

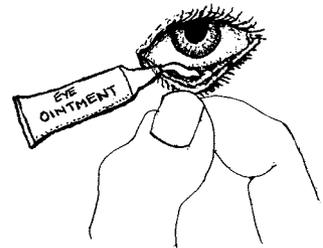
CARE OF THE EYES

Wash your face every day with mild soap and clean water. This will help prevent eye infections such as pinkeye (conjunctivitis). This infection causes redness, pus, and mild 'burning' in one or both eyes. The eyelids often stick together after sleep. Most conjunctivitis is very contagious. The infection is easily spread from one eye to the other, and from one person to another.

Do not use the same towel or cloth as someone who has an eye infection. And always wash your hands before and after touching your eyes. Keep flies away from the eyes. Flies can spread infection from one person to another.

Treatment:

First clean pus from the eyes with a clean cloth moistened with water that has been boiled and cooled. Then put in erythromycin eye ointment (see page 343). Pull down the lower lid and put a little bit of ointment inside, like this. Putting ointment outside the eye does no good.



CAUTION: Do not touch the tube against the eye.

If you have leprosy

Some disabilities, such as leprosy, make it more likely a person will develop vision problems or get an eye infection.

If you have leprosy, the muscles around the eyes may be weak, or may not have much feeling. This means that your eyes may not blink enough on their own. Not blinking can cause dryness and eye infection.

If you do not blink often, or if your eyes are red, you can:

- wear sunglasses, especially sunglasses that wrap around the sides of the face.
- wear a hat with a wide brim to shade your eyes.
- close your eyes tightly many times during the day.
- close your eyes tightly and roll your eyes upward frequently.
- wash the skin around your eyes often.



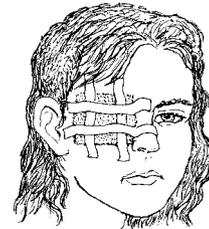
If pus forms, follow the treatment information for pinkeye (see page 99). Keep the eye closed as much as you can. If necessary, cover it with an eye patch.

You can make a patch with any clean soft cloth or gauze and tie it around the head (not too tightly) to keep it in place,

or

tape the cloth or gauze to the eye like this.

Do not press on the eye.



If you cannot close your eyelids ('lid lag'), tape your eye closed with clean cloth or gauze to prevent dryness and infection.

To keep your eyes moist and help prevent infection, each day put a few drops of clean salty water (a pinch of salt to one cup or glass of clean water) into each eye.

Passing urine and stool

Some women with disabilities do not have complete control over when they pass urine or stool. This is especially common for women whose disability affects their muscles in the lower body, such as paralysis from polio or a spinal cord injury.

If you cannot wash your genitals by yourself, ask a family member or helper to help you keep your genital area clean and dry. If you need to wear cloth or nappies (diapers) to catch urine or stool, change them often to prevent rashes, infections and sores (see page 114).

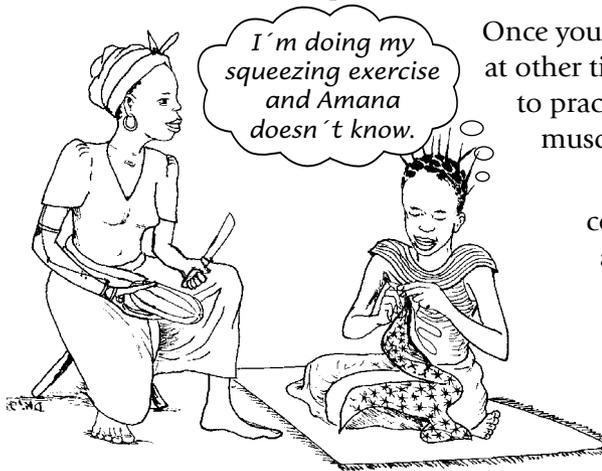
When you go outside, if possible take an extra change of clothing with you. Then, if you lose control of your bladder or bowel and soil your clothes, you will be able to change and avoid being embarrassed, and also avoid getting an infection.

BLADDER CONTROL

If you pass urine often or leak urine, try **the squeezing exercise** to help strengthen weak muscles. This exercise can also help keep your muscles strong so you will be less likely to leak urine when you are older.

The squeezing exercise

First practice while you are passing urine. As the urine comes out, stop it by tightly squeezing the muscles in your vagina. Count to 10, then relax the muscles to let the urine come out. Repeat this several times whenever you pass urine.



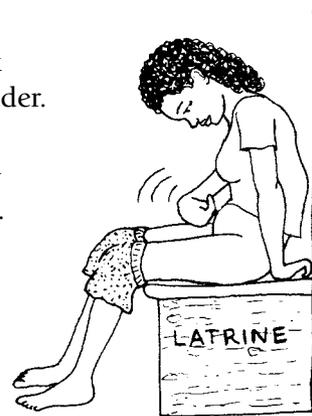
Once you know how, practice the squeezing exercise at other times during the day. No one will know. Try to practice at least 4 times a day, squeezing your muscles 5 to 10 times each time.

Some women may need surgery to help control leaking urine. If your urine leaks a lot and this exercise does not help, get advice from a health worker trained in women's health. The squeezing exercise is good for all women to do every day. It helps keep muscles strong and can prevent problems later in life.

Emptying the bladder

If your disability makes you unable to pass urine without assistance, you will need another way to empty your bladder. Some women can urinate and empty the bladder if they:

- tap their belly over the bladder, right below the belly button (navel, umbilicus) and above the pubic bone.
- push down with their hands on the lower belly, over the bladder.
- put a fist over the lower belly and gently press it by bending the upper body forward.
- strain to push urine out by making the stomach muscles tight.



You should use these methods only if the urine comes out easily with gentle pressure. If your muscles do not relax and let the urine out, pushing on your bladder can force the urine back into the kidneys and damage them.

If none of these methods work, you will need to use a rubber or plastic tube called a catheter. Do not use a catheter unless it is the only way you can pass urine. Even careful use of a catheter can cause infection of the bladder and kidneys.

Using a standard catheter

A catheter is a flexible rubber tube used for draining urine out of the bladder. Many women who need to use one put a clean or sterile catheter into the bladder every 4 to 6 hours to empty it. The more liquid a woman drinks during the day, the more often she needs to use the catheter.

Some women do not drink much water because they do not want to use the catheter very often. But this can cause other problems. If you do not drink enough liquid, you can get an infection in your bladder or kidneys, or have difficulty passing stool (constipation).

It is important not to let your bladder get too full. This can cause dysreflexia (see page 117), and can also cause the urine to go back up into the kidneys and damage them.

Many women learn to use a catheter while they are sitting on a toilet or pot. Women can also use a catheter in a wheelchair, emptying the urine into a toilet or a bottle. Experiment with what works for you. It takes practice to learn how to use a catheter when you are sitting, but many women find using a catheter makes it easier for them to do their daily activities. For most women, the best catheter size to use is a 16. A very small woman may find a size 14 fits better.

A person using a catheter is more likely to get a urinary infection than someone who does not. This usually happens because the catheter is not clean enough and germs get into the bladder. Cleaning your catheter carefully is the best way to prevent a urinary infection. Always wash your hands with mild soap and clean or boiled water before you touch the catheter, and wash it before and after using it. Keep the catheter in a clean place when you are not using it.

Standard catheter



Foley catheter



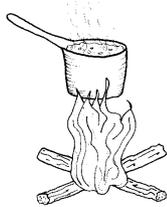
A 'Foley' (indwelling) catheter has a small balloon near the tip. The catheter is made this way so it will stay inside the bladder for long periods of time. The balloon is filled with water when it is inside the bladder, so it will not slip out. 5cc of water is usually enough to hold the Foley catheter inside. If it comes out, increase the amount of water to 12cc or 15cc.

Water is injected into the balloon here.

Urine drains out here.

How to put in a catheter

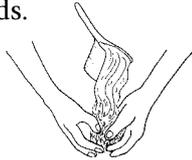
1. Boil the catheter (and any syringe or tool you may be using) for 20 minutes. Or at least wash them well in water that has been boiled and cooled, and keep them clean.



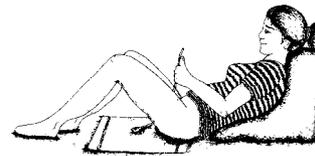
2. Carefully wash the skin around the genitals with mild soap and clean water. Take care to clean the area where urine comes out and the folds of skin around it (the vulva). If you do not have mild soap, use only clean water. Strong soap can harm your skin.



3. Wash your hands. After washing, touch only things that are very clean.



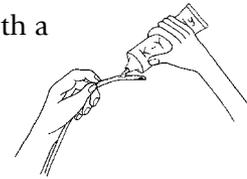
4. If you can, sit where your genitals are not touching anything, like the front of a chair, or on a clean toilet seat. If you have to sit on the ground or another solid surface, put clean cloths under and around the genitals.



5. If you have to touch anything, wash your hands again with mild soap and water.

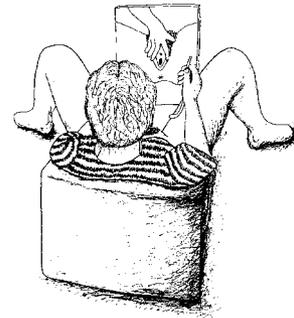


6. Cover the catheter with a sterile, water-based lubricant (not oil or petroleum jelly). This helps protect the soft skin of the genitals and urine tube (urethra). If you do not have any lubricant, make sure the catheter is still wet from the water you boiled it in or cleaned it with, and be extra gentle when you put it in.

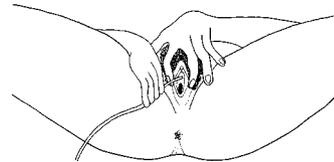


(continued on next page)

7. If you put the catheter in by yourself, use a mirror to help you see where the urinary opening is, and use your pointing (index) finger and third finger to hold the skin around the vagina open. The urinary opening is below the clitoris almost at the opening to the vagina (see page 78). After you have done this a few times, you will know where the opening is and you will not need to use a mirror.



8. Then, with your middle finger, touch below your clitoris. You will feel a sort of small dent or dimple, and right below that is the urinary opening. Keep your middle finger just above that spot, and with your other hand, hold the clean catheter 4 to 5 inches from the end, touch the tip to just below the end of your middle finger, and gently guide the catheter into the opening until urine starts to come out. Be very careful not to touch the tip of the catheter with your fingers or hands.



Make sure the catheter is in a downward position so that the urine can come out.

You will know if the catheter goes into the vagina instead of the urinary opening because it will go in easily, but no urine will come out. Also, when you remove it, the catheter will have discharge (mucus from the vagina) in it. Rinse the catheter in clean water, and try again. If you do get a bladder or kidney infection, talk with a health worker. You may have an infection in your vagina.

IMPORTANT To avoid infection when using a catheter, it is important for you to be very clean, and to use only a catheter that is sterile. If it is not possible to use a sterile catheter each time, make sure it is very clean.

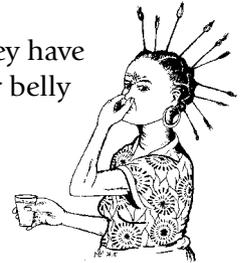
Treating and preventing urinary infections

Bladder infection

Most women can tell when they have a bladder infection because they have pain or burning when they pass urine, or they have pain in the lower belly just after passing urine.

If you have no feeling in the belly, you will have to look for some of these other signs:

- need to pass urine very often
- cloudy-looking urine
- urine that smells bad
- urine that has blood or pus in it
- sweating or feeling hot (signs of dysreflexia, see page 117)



Smelly urine is a sign of infection.

Treatment for a bladder infection

Start treatment as soon as you notice the signs.

- **Drink a lot of water.** Try to drink at least 1 cup of clean water every 30 minutes. This will make you pass urine often and can help wash out germs before the infection gets worse.
- **Stop having sex for a few days** or until the signs have gone away.



Often bladder infections can be treated with teas or other plant remedies. Ask the older women in the community which plants will help.

If you do not feel better in 1 to 2 days, start taking medicines as well as drinking a lot of water. If you do not feel better in 2 more days, see a health worker. You may have a sexually transmitted infection (see page 158).

Medicines for bladder infection		
Medicine	How much to take	When to take
cotrimoxazole (160 mg trimethoprim and 800 mg sulfamethoxazole)	2 tablets of 480 mg	by mouth, 2 times a day for 3 days
or nitrofurantoin	100 mg	by mouth, 2 times a day for 3 days

Kidney infection

Sometimes a bladder infection can spread through the urine tubes into the kidneys. Kidney infections are more serious than bladder infections.

Signs of kidney infection:

- middle or lower back pain, often severe, that can go from the front, around the sides, and into the back
- nausea and vomiting
- feeling very ill and weak
- fever and chills
- any bladder infection signs

If you have signs of both bladder and kidney infection, you probably have a kidney infection. When a woman has a kidney infection, she is usually in great pain and can become very ill. She needs help right away and home remedies are not enough. Start taking one of these medicines right away. If you do not start to feel better after 2 days, see a health worker.

Medicines for kidney infection		
Medicine	How much to take	When to take
ciprofloxacin (Do not use if you are breastfeeding)	500 mg	by mouth, 2 times a day for 10 days
or cefixime	500 mg	by mouth, 2 times a day for 10 days
or cotrimoxazole (160 mg trimethoprim and 800 mg sulfamethoxazole)	2 tablets of 480 mg	by mouth, 2 times a day for 10 days
If you cannot swallow medicines because you are vomiting, see a health worker. You will need medicines by injection.		

How to help prevent urinary infections

Keep your genitals clean. Germs from the genitals—and especially the anus—can get into the urinary opening and cause infection. Try to wash the genitals every day, and always wipe from front to back after passing stool. Wiping forward can spread germs from the anus into the urinary opening. Also, try to wash your genitals before and after having sex. Keep the cloths and pads used for your monthly bleeding very clean and dry.

- Make sure your catheter is not bent or twisted so that urine can come out easily.
- Pass urine after having sex. This helps wash out the urine tube.
- Drink plenty of liquids and empty your bladder regularly.
- Do not lie down all day. Stay as active as you can.



Most women take medicine only when they have signs of an infection. But some women get infections frequently, often when they begin their monthly bleeding, so they start to take medicine then.

Bowel control

Try to pass stool at the same time every day or every other day. Do it even if you have had an accidental bowel movement at another time. Eventually, your body will adjust to the schedule and the stool will come out more easily at a regular time. This is called a bowel program.

Suppositories such as bisacodyl or glycerin can be used. These bullet-shaped pills put into the anus will stimulate the bowel and cause it to push out stool.

If you cannot use the muscles in your lower body to pass stool, you can help the stool come out with a finger. You can also use this method if you have difficulty passing stool (constipation) or have hard stools.

Stool usually comes out easier when you are sitting, so try to remove the stool when you are sitting on a toilet or pot. If you cannot sit, try to do it lying on your left side. Ask someone to help you if necessary. Be careful not to get any stool in your vagina or urine hole. Harmful germs in the stool can cause an infection.

HOW TO REMOVE STOOL:

1. Cover your hand with a clean plastic or rubber glove, or a plastic bag. Put vegetable or mineral oil on your pointing finger or on whatever finger works best.
2. Put your oiled finger into the anus about 2 cm (1 inch).
3. Gently move the finger in circles for about 1 minute, until the muscle relaxes and the stool pushes out.
4. If the stool does not come out by itself, remove as much as you can with your finger.
Be gentle, so you do not scratch or cut the skin inside the anus.
5. Clean the anus and the skin around it well, and wash your hands.



To keep your finger clean, use a thin rubber glove or 'finger cot.'



Some women can remove stool while sitting in a wheelchair. To do this, make a hole in the ground or have a container to put the stool into. Then move forward on the seat, and turn sideways as far as you can. Use a looped strap or a belt to pull one leg over and up, so that you can reach your anus with your hand. You can loop the other end of the strap around your chair, to keep your leg in place.

Constipation (difficulty passing stool)

Women with cerebral palsy and spinal cord injury often have constipation or hard stools that can take several days to come out. This can cause serious problems, such as when the stool forms a hard ball in the rectum (impaction), or dysreflexia (see pages 117 to 119).

To prevent constipation:

- drink at least 8 glasses of liquid every day. Water is best, if you have it.
- try to eat plenty of fruits, vegetables, and foods with fiber—such as whole grains and cassava (manioc), beans, or other root foods that are high in fiber.
- keep your body moving and exercise as much as possible.
- keep a regular bowel program.
- add a little vegetable oil to your food each day.
- massage your belly.
- eat ripe papaya or mango, or green bananas.
- mix one spoonful of psyllium husks (isabgol, the crushed seeds of the *Plantago ovata* plant) with a glass of water, 2 times a day.

If you have not passed stool for 4 days or more, you can take a mild laxative, such as milk of magnesia. But do not do this if you have any pain in your stomach. And do not take laxatives often. Inserts that contain glycerin (*Dulcolax* is one brand) can also be used to relieve constipation.

Painful swellings around the anus (hemorrhoids)

Hemorrhoids are swollen veins around the anus. They often itch, burn, or bleed. Constipation makes them worse. Women who use wheelchairs, women who sit often, and women with cerebral palsy are more likely to have problems with hemorrhoids as they grow older. If you remove stool with your hand, watch for bleeding. This is a common sign of hemorrhoids.

What to do if you have hemorrhoids:

- Sit in a basin or pan of cool water to relieve the pain.
- Follow the advice on this page for preventing constipation.
- Soak some clean cloth in witch hazel (a liquid plant medicine) and put it on the painful area.
- Kneel with your buttocks in the air. This can help relieve the pain.



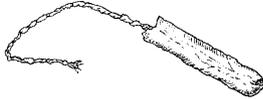
Sitting in cool water can make hemorrhoids less painful.

Monthly bleeding

During monthly bleeding, most women and girls use pads of folded cloth or wads of cotton to catch the blood coming from the vagina. They are held in place with a belt, pin, or underwear. The pads should be changed several times each day, and washed well with soap and water if they are to be used again.



pad



tampon

If possible, after washing the cloths, dry them in the sun, or iron them with a very hot iron. The heat will dry them and will also kill germs and prevent infection when they are used again. Between bleedings, keep the cloths in a clean, dry place away from dust, dirt and insects.

Some women put something inside the vagina that they buy or make from cotton, cloth or a sponge. These are called tampons. If you use tampons, be sure to change them at least 3 times each day. Leaving one in for more than a day may cause a serious infection.

Wash your genitals with water each day to remove any blood that is left. Use mild soap if you can. If you pass urine with a catheter, pay special attention to cleaning the area around your urine hole when you are bleeding. If you get blood in the tube of the catheter, rinse it out right away. The blood can block the tube and prevent the urine from coming out.

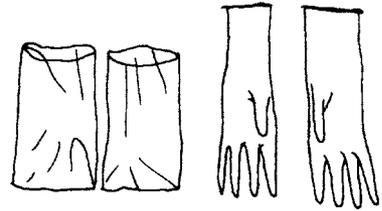
Some women with disabilities may need extra help when they have their monthly bleeding. **Do not feel bad if you sometimes get blood on your clothing or bedding.** This happens to ALL women sometimes. If you need assistance to pass urine and stool, then your pads can be changed at that time. If it is difficult for you to change pads during the night, sleep with a towel or cloth underneath you that you can wash easily if blood gets on to it.



If you are blind

When you first start to get your monthly bleeding, because you cannot see the blood, it may be difficult to tell when you have it. But after a few months, it will become a regular part of your life, and you will probably have feelings in your body that will tell you. During the time you are bleeding, make sure to change your pads or tampons as often as possible. Wash your hands after each time you change your pads or check to see if you are bleeding. Ask family members or someone you trust to check that you do not have any blood on your clothing. And if you do, ask them to help you make sure you have been able to remove the blood stains from your clothing when you wash them.

If you help a woman with her monthly bleeding, it is best to wear plastic gloves or plastic bags on your hands to prevent the blood getting on your skin. Although the chance of diseases passing from one woman to another during monthly bleeding is very small, it is a good idea to prevent possible infection from hepatitis and HIV.



Helping girls who have trouble learning or understanding

If a girl who has trouble understanding needs help with her daily care, an older sister, aunt, or mother can show her how she takes care of her monthly bleeding:

- Be sure you use the same kind of pads or cloth to catch the blood that the girl will use.
- Show her where the supply of pads or cloth is kept.
- Show her where the pads or cloth are thrown out, or how they are washed if they are to be used again.
- Put a pad or cloth inside her underwear so she can “practice” and get used to wearing it.
- Explain that she may want to wear dark clothing when she does start bleeding so there will be less chance of blood stains showing.



Discomfort with monthly bleeding

During monthly bleeding, the womb contracts (squeezes) in order to push out the lining. These contractions can cause pain in the lower belly or lower back, sometimes called cramps. The pain may begin before or just after bleeding starts.

Heat on the belly can help reduce cramps. Fill a bottle or some other container with hot water and place it on your lower belly or lower back. Or use a thick cloth soaked in hot water. If heat does not help, you can take a mild pain medicine such as ibuprofen (see page 345).

Monthly bleeding can also make your muscles sore, or make you feel more tired than usual. The usual signs of your disability may become worse during monthly bleeding. Some women find that their breasts get swollen and sore during monthly bleeding. And some women have emotional feelings that are especially strong or harder to control.

For more information about monthly bleeding, see page 74.

Heavy monthly bleeding

Some women have heavy bleeding each month. This may be normal for many of them, but for others, it can cause anemia (see page 87). Monthly bleeding is heavy if your pad or cloth is soaked through in less than 3 hours. If this happens to you, take ibuprofen (see page 345). This can slow down the bleeding and prevent anemia. If this does not help, or if your monthly bleeding comes more often than once every 3 to 4 weeks, talk with a health worker.

Discharge from the vagina

It is normal to have a small amount of wetness or discharge in the vagina. This is the natural way the vagina cleans and protects itself. A change in the amount, color, or smell of the discharge from your vagina sometimes means you have an infection, but it can be difficult to tell from your discharge what kind of infection you have.

**VAGINAL YEAST INFECTIONS
(YEAST, WHITE DISCHARGE, WHITE PERIOD, CANDIDA)**

Yeast is a common infection caused by a fungus. It usually happens in the genitals or on the skin where it stays hot and damp (from leaking urine or sweat) for a long time. Yeast is not usually sexually transmitted.

Any woman can get a yeast infection in the vagina, especially if she sits for long periods of time as do women who ride wheelchairs. Yeast infections also happen more to women who have diabetes or are taking antibiotics. It is best for a pregnant woman to be treated before the birth, or the baby can get a yeast infection called thrush.



A change in the smell or color of your discharge can mean you have an infection.

Skin infection

Yeast infections are not always in the vagina. Women can also get yeast infections of the skin, especially between skin folds around the groin, down the insides of the thighs, or where skin touches on skin around a roll of fat or under the breasts.

A yeast infection of the skin can become an open sore. If it gets dirty with stool or urine, it can start other serious infections and pass to other areas of the body. For women with limited movement who sit for many hours at a time, this can be especially dangerous if it passes to the bones at the very bottom of the spine.

Signs of yeast infection:

- you feel very itchy inside or outside your vagina
- bright red skin outside and inside your vagina, in skin folds, or down the inside of your thighs, that sometimes bleeds
- a burning feeling when you pass urine
- white, lumpy discharge, like milk curd or yogurt
- a smell like mold or baking bread

Yeast can often be cured using natural remedies. One natural treatment is to mix 3 tablespoons of vinegar with 1 liter (1 quart) of boiled and cooled water. Soak a piece of clean cotton in the mixture and insert it into the vagina every night for 3 nights. Remove the cotton each morning.

Medicines for yeast infection

Soak a clean piece of cotton in gentian violet 1%. Insert the cotton into the vagina, every night for 3 nights. Remove the cotton each morning. Or use any of the following medicines. Creams made of the medicines below can also be used on any red skin outside the vagina or on the buttocks or legs. Rub the cream in gently to the affected areas.

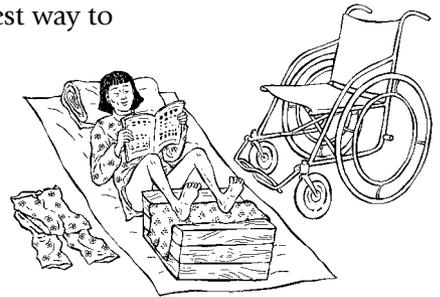
Medicine	How much to take	When to take
miconazole	put one 200 mg insert	high in the vagina, each night for 3 nights
or nystatin	put one 100,000 Units insert	high in the vagina, each night for 14 nights
or clotrimazole	put two 100 mg inserts	in the vagina, each night for 3 nights

If it is available, you can also use an antifungal powder such as nystatin. Apply the powders lightly to the affected areas.

Prevention of yeast infection

Yeast grows best in areas that are warm and moist. The best way to prevent yeast infections is to keep your vagina, the skin around it, your buttocks, and the skin under your breasts, clean and dry. Here are some suggestions:

- If you leak urine, change your underclothes as often as you can. You can use clean cloths or pads (like those used for monthly bleeding) and change them often during the day.
- If you sit most of the time, try to change your position at least once every hour—more often if you can. Also, try to get out of your chair and lie down with your legs open for 15 minutes at least 2 times a day. This will also help prevent pressure sores (see page 114).
- If you have no feeling in your lower body, use a mirror to look and see if there is any unusual redness in or around your vagina. If you cannot do this yourself, ask someone you trust to do it for you, especially if you notice an unusual smell from your genitals.



- Wear clean, dry underclothes made of cotton (because it absorbs wetness) and which fit loosely to let air in around your genitals and keep them dry.
- When you lie down to sleep, do not wear any underwear. This will help your genitals to stay dry.
- During your monthly bleeding, change the cloth or pad you use to catch the blood several times a day. If they are to be used again, wash them well with soap and water and let them dry completely in the sun.
- Use a tampon (made from cotton, cloth or a sponge) inside your vagina, and be sure to change it at least 3 times a day. Leaving one in for more than a day may cause a serious infection (for more information about monthly bleeding, see page 109).

Bacterial vaginosis

Bacterial vaginosis is another infection that causes a discharge from the vagina. It is not sexually transmitted. If you are pregnant, it can cause your baby to be born too soon.

Signs:

- more discharge than usual
- a fishy smell, especially after sexual intercourse
- mild itching

Treatment:

Medicines for discharge: to treat bacterial vaginosis		
Medicine	How much to take	When to take
metronidazole	400 to 500 mg	by mouth, 2 times a day for 7 days
or metronidazole (avoid metronidazole in the first 3 months of pregnancy)	2 grams (2000 mg)	by mouth, in a single dose
or clindamycin	300 mg	by mouth, 2 times a day for 7 days
or clindamycin	5 grams of 2% cream	inside the vagina at bedtime for 7 days
Your partner should also be treated with 2 grams of metronidazole by mouth, one time only.		
IMPORTANT Do not drink alcohol during the time you are taking metronidazole.		

IMPORTANT Discharge in the vagina can be caused by sexually transmitted infections (STIs). For more information, see page 158.

Pressure sores

Pressure sores are especially common for women who use wheelchairs or lie in bed and do not move their bodies regularly. Pressure sores start when the skin over the bony parts of the body is pressed against a chair or bed. The blood vessels get squeezed shut, so that not enough blood can get to the skin. Eventually, a dark or red patch will appear on the skin. If the pressure continues, an open sore can develop and work its way deeper into the body. Or the sore can start inside the body, near the bone, and gradually grow toward the surface. If a pressure sore is not treated, the infection can spread through the body and kill the person.

Because her bones are less cushioned, a very thin woman is more likely to get pressure sores. You are also more likely to get a pressure sore if:

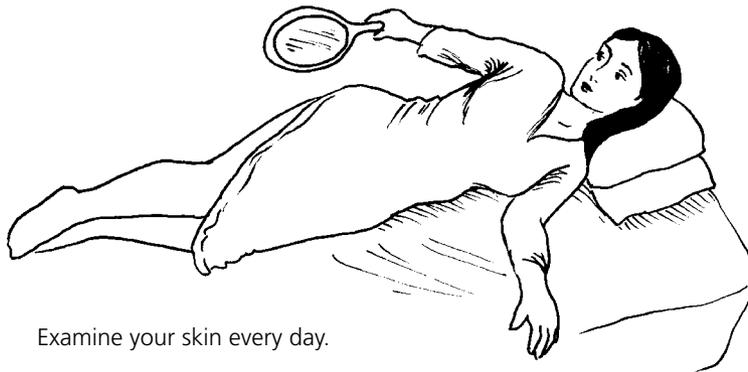
- you use a wheelchair, or sit or lie in bed most of the time.
- you have urine leaking (incontinence).
- you get muscle spasms that cause your body to rub against sheets or clothes.

Signs:

- hot, red, or dark skin that does not get lighter in color when you press it
- a swelling or an open wound on the skin

When you notice the first signs of a pressure sore:

- change your position at least once an hour.
- use extra padding to protect the area from pressure.
- keep watching the area to see if it gets better or worse.



Examine your skin every day.

If you have a pressure sore:

- Keep all pressure off the sore area. Do not sit or lie on the sore at any time.
- Gently wash the sore and the surrounding skin twice a day, with clean or boiled and cooled water. Wash around the edge of the sore first. Then use a new piece of clean cloth or gauze to wash from the center out to the edges.
- After cleaning, spread some ointment on a clean cloth or piece of gauze, and cover the sore lightly. You can use any mild ointment, such as antibiotic cream or petroleum jelly (*Vaseline*). This will prevent the skin from becoming dry and will also protect the sore from dust, dirt, flies and other insects.
- Be careful not to rub or massage the skin around the pressure sore. This can weaken the skin or tear it and make the sore worse.

If the sore is deep and has a lot of dead flesh:

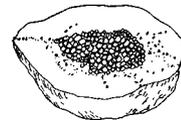
- The sore needs to be cleaned 3 times a day.
- The sore is often bigger than it looks. It can go deep under the edges of the skin. When the sore is cleaned, be careful to take out more of the dead flesh. Little by little, the dead flesh must be removed until the healthy red flesh or bone is visible.
- Wash the sore with soap and water every time dead flesh is cleaned away. Use liquid surgical soap if it is available. Afterward, rinse the sore with clean or boiled and cooled water.



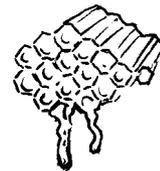
Dead flesh may be gray, black, greenish, or yellowish and may have a bad smell if infected.

Home treatments for pressure sores

Papaya (paw paw): This fruit contains chemicals that help make the old flesh in a pressure sore soft and easy to remove. Soak a sterile cloth or piece of gauze in the 'milk' that comes from the trunk or green fruit of a papaya plant. Pack this into the sore. Repeat this 3 times a day.



Honey and sugar: These will kill germs, help prevent infection, and speed healing. Mix honey and sugar together into a thick paste. Press this deep into the sore, and cover with a thick, clean cloth or gauze bandage. (Molasses or thin pieces of raw sugar can also be used.) Clean out and refill the sore at least 2 times a day. If the honey and sugar becomes too filled with liquid from the sore, it will feed germs rather than kill them.



If a pressure sore gets infected

If the pressure sore has a bad smell and is swollen, red, and hot, or if you have fevers and chills, the sore has become infected. It is best to go to a health worker who can find out what germs are causing the infection and what medicine will work best. If that is not possible, you can use an antibiotic, such as doxycycline, erythromycin, or dicloxacillin (see the Green Pages for information about using these medicines).

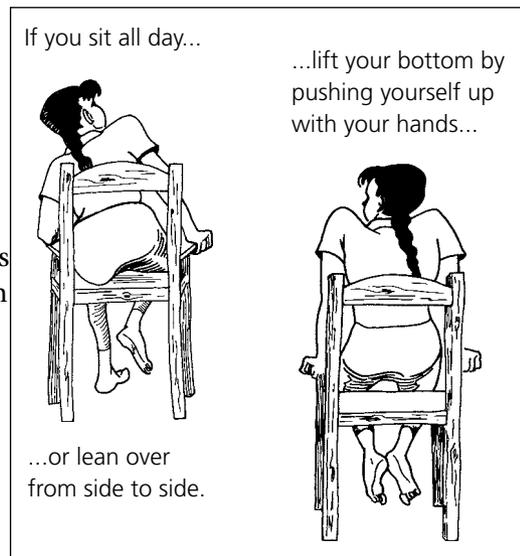
- Pressure sores heal from the inside out, so you will notice the sore gradually start to fill in. This will not happen quickly, so try to be patient.
- If necessary, take paracetamol for pain (see page 350).

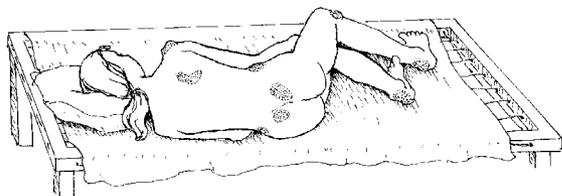
If you have lost feeling in part of your body, it is important for you, and your family and caregivers, to learn as much as possible about pressure sores and how to treat and prevent them. Pressure sores are very common in persons with spinal cord injury. Often the sores start in hospitals shortly after the injury, because the injured person does not get moved enough from one position to another to relieve pressure. With proper attention, no one should get pressure sores.

Preventing pressure sores

Even if you cannot make big movements, try to move or shift your weight at least every 2 hours. If you lie down all the time, have someone help you change position if you cannot easily move yourself.

Try putting a pillow or soft blanket roll where your skin rubs together, such as between your knees or between your head and your arms. You can also lie or sit on something soft that reduces pressure on bony areas. A cushion or sleeping pad that has hollowed-out areas around the bony parts will help. You can make a simple cushion or sleeping pad from a plastic bag filled with uncooked beans or rice. It must be refilled with new rice or beans once a month. If you use a wheelchair, try to make sure you always sit on a good cushion.





Examine your whole body carefully every day. You can use a mirror to look at your back. If you notice a dark or red place, try to avoid any pressure on this area until your skin returns to normal.

Try to wash every day with mild soap and clean water. Pat your skin dry, but do not rub it. To prevent dry skin, which can crack and tear more easily, gently apply a little lotion once a day. **Never use alcohol on your skin.** Alcohol can dry out the skin and make it weak.

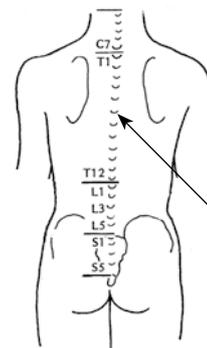
Eat plenty of fruits, vegetables, and foods rich in protein and iron—such as lentils, beans, peas (especially when they are sprouted), meat (especially liver, heart, and kidney), fish, or chicken. This will make your skin and muscles healthy and strong, which will help to prevent pressure sores.

Sudden high blood pressure with pounding headache (dysreflexia)

People with a spinal cord injury above the T6 bone of the spine can get sudden high blood pressure with pounding headaches (dysreflexia). It is the body's reaction to something that would normally cause pain or discomfort, but which the person does not feel because of the injury. Dysreflexia can be caused when something touches or stimulates an internal organ such as the bowel, genitals, bladder, or intestine, or the skin on the lower body or the breasts.

Common causes of dysreflexia:

- a very full bladder. This can be caused by a catheter that has become bent or twisted.
- a bladder infection, or stones in the bladder or kidneys (see page 105)
- too much stool in the body (constipation, see page 108)
- pressure sores, burns, or irritated skin which you may not be able to feel (for information about pressure sores, see page 114)
- hot or cold temperatures against your skin, such as from lying on a cold examination table
- womb contractions during monthly bleeding or during childbirth.
- sexual activity



Doctors use letters and numbers to identify bones in the spine. T6 is about here.

Signs of dysreflexia:

1. sweating, especially from your face, arms, or chest
2. reddish or dark blotchy skin above the level of the spinal cord injury
3. goose bumps or pimples on arms or chest
4. blurry vision or seeing spots
5. stuffy nose
6. severe, pounding headache
7. feeling sick (nausea)
8. sudden high blood pressure (up to 240/150)



Any of these problems alone or in combination can be a sign of dysreflexia. If you think you have dysreflexia, you need help right away. Try to have a family member or another caregiver practice how to care for you if you have sudden high blood pressure. You and they must act quickly to remove the cause and lower the blood pressure. You can use this information to let a helper or a health worker know how they can also help if you have dysreflexia.

IMPORTANT Dysreflexia is a medical emergency. The high blood pressure can cause seizures or deadly bleeding inside the brain. Caregivers must never leave a person with dysreflexia alone.

Always pay attention to the signs of dysreflexia. Some signs do not indicate an emergency, but are the way some women with a spinal cord injury can know something is happening with their body. For example, if you start to feel a little hot and sweaty, or if you have a tingling feeling in your skin, it may be because your shoes or clothing are too tight, or you are sitting on something hard, or your urine catheter is twisted or bent, or your toenail is growing into your skin. Usually, if you can take care of the problem, your dysreflexia signs will go away.

Treatment for dysreflexia:

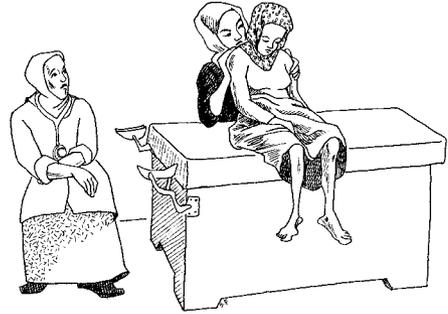
- If you are lying down, sit up and stay sitting until the signs have gone away.
- Loosen any tight clothing, including tight socks or stockings.
- If it is caused by pressure or temperature, change your position to remove the pressure or get away from the hot or cold surface.
- Remove anything that is rubbing against the skin.
- Feel the lower belly to see if the bladder is full.

If you cannot pass urine:

- Insert a catheter and empty the bladder (see pages 103 to 104).

If you are already using a catheter:

- Are there bends or twists in the catheter? Straighten them so urine can flow.
- Is the catheter blocked? Replace the catheter. Or inject 30 cc of boiled and cooled water (or sterile saline solution) into the catheter to clear the tube.

**If you have signs of a urinary infection:**

- See pages 105 to 106. If this seems to be the cause, inject an anesthetic solution into the bladder through a catheter. Use 10 cc of 1% lidocaine in 20 cc of boiled water. Clamp the catheter for 20 minutes and then release it. The infection also needs to be treated with antibiotics.

If your bowel is full:

- If it has been a long time since passing stool, put some lidocaine jelly on a gloved finger and gently put it in the anus to check if the bowel is full. If it is packed hard with stool, put more lidocaine jelly in the anus. Wait 15 minutes or until the headache becomes less. Then remove the stool with a finger (see page 107).

If the signs do not go away in 10 minutes, use medicine. Nifedipine will make the blood pressure go down in 5 to 10 minutes.

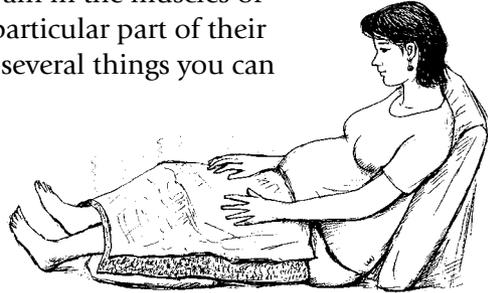
Medicines for dysreflexia	
Medicine	How much to take
nifedipine	Bite into and swallow a 10 mg capsule.
or nifedipine	Crush a 10 mg tablet in a little clean water to make a soft paste and put the paste under the tongue.

Too much stool or urine in your body can cause dysreflexia. Take care to do your bowel program regularly. Drink a lot of water and eat foods that will help you have easy bowel movements. In addition, make sure to pass urine often. If you use a catheter, make sure it does not become twisted or bent.

Managing pain

Some disabilities, such as arthritis, cause pain in the muscles or joints. Sometimes women have pain in a particular part of their body. Or they may hurt all over. There are several things you can try to help ease pain.

Heat is usually best for sore, stiff joints and muscles. Soak cloths in hot water and place them on the painful areas. The water should be hot enough for you to be able to hold your hand in it comfortably. Otherwise, you may burn your skin.



Cold is usually best for inflamed joints or injuries. You can often tell when an area is inflamed because it will feel hot and may be red and swollen. Wrap ice in a cloth or a towel and place it on the painful areas. Do not put the ice directly on your skin. After 10 or 15 minutes, take the ice pack off and let your skin warm up. When your skin is warm, you can use the ice again.

Try to rest the area that hurts. Do not stress the muscles or joints, and try to avoid heavy work or overuse that strains the hurting place.

Gentle movement often helps the pain. Here are some ideas to keep your joints and muscles moving in ways that soothe the pain:

- Rub the painful areas gently.
- Stretch your muscles gently.
- Have someone massage your muscles.
- Swim or move around in clean, warm water.

A pain medicine such as paracetamol (acetaminophen) can help with the pain but will not reduce swelling. Aspirin and ibuprofen help control pain and reduce swelling in the joints. Look up these medicines in the Green Pages for more information on pain relief.

IMPORTANT If your ears start to ring, or you start to bruise easily, take less aspirin.

If you are taking aspirin or ibuprofen because your joints are swollen, keep taking the medicine even after the pain starts to go away, until the joints are less swollen. Do not take both aspirin and ibuprofen within 4 hours of each other.

Working for change

While many people believe it is important to take care of disabled women, in reality many women with disabilities do not get enough of the care and information they need to lead healthy and active lives.

What families and caregivers can do

Care from our families and helpers makes our lives easier in many ways. They can also help us to be more independent by encouraging us to do as much as we can to take care of our own bodies. Even so, as women with disabilities, we may need extra help to:

- get enough good healthy food and clean water.
- exercise and stretch to keep our bodies strong and flexible.
- bathe, and clean our teeth.
- remove stool or urine and change the cloths or pads used to absorb monthly bleeding.
- check, clean and treat pressure sores. (See pages 114 to 117.)
- keep some medicines and supplies at home or nearby, especially if medical care is far away. Try to include pain relievers, an antibiotic for urine or skin infections, clean gauze, and any medicines used regularly to treat her disability.



We trust you to help us.

Most of us who are blind or deaf can take care of our own physical needs. But we may still need help getting information to keep ourselves healthy. For example, a blind person may need you to read health education information out loud to her—even if the information is about things you usually would not speak about. And a deaf person may need you to tell her about important health messages you hear on the radio or from a health worker.

What communities can do

Communities can do a lot to improve the conditions that will allow us to take care of our bodies so we can remain healthy. Many women with disabilities are poor and some live isolated lives. Like everyone else, we need access to care, nutritious food, clean water and sanitation, and a safe place to live. We also need the companionship and respect of our neighbors. Talk to us and to our families about things the community can do to help us look after our health.

- Some of us may need daily care from our families and helpers. Community leaders and neighborhood groups can arrange other help so our needs can be met and our family and regular helpers get a break.
- Many older women with disabilities are very poor, live alone, or have a hard time finding someone to help us. By arranging for helpers or companions—or giving practical support in other ways—the community can greatly improve our lives.
- Help us farm our fields or go to market so we can have enough good food.
- Work to make sure that women with disabilities have access to clean water.
- Organize your community to build or remodel latrines and toilets so they can be safely used by people with disabilities (see page 123).

For more information on how communities and families can stay healthy, see Chapter 10 in *Where Women Have No Doctor*, and the booklets *Sanitation and Cleanliness* and *Water for Life*.

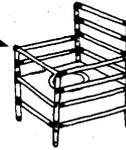


Making toilets and latrines easier to use

There are many ways to make toilets easier to use for children and adults with disabilities. Be creative in finding and showing the community solutions that fit your needs.

If a person has **difficulty squatting**, make a simple hand support or a raised seat. Or, if the toilet is set in the ground, make a hole in the seat of the stool or chair and place it over the toilet.

removable front bar can be added if needed



If a person has **difficulty controlling her body**, make supports for her back, sides, and legs, and a seat belt or bar.

Use a rope or fence to guide **blind** people from the house to the toilet.

If a person has **difficulty adjusting or removing her clothes**, adapt her clothing to make it loose or elastic. Make a clean, dry place to sit or lie down and dress.

If a person has **difficulty sitting** you can make moveable handrails and steps.

Toilets for wheelchairs:

bell, or something to make noise, for help if needed

backrest to support seating

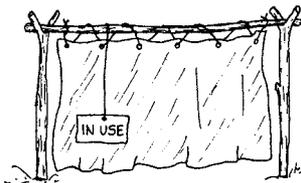
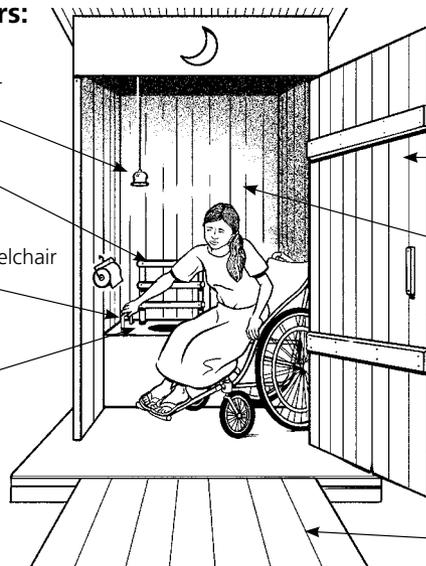
handrail to make moving from wheelchair to toilet easier

toilet seat and wheelchair on same level

extra-wide door that opens outward for easy access

shelter big enough for a wheelchair to get inside easily

ramp to the toilet is level and easy to get to from the house



Remind people in the community that anyone with a disability has the same need for privacy as anyone else and should get the privacy they need.

