

Urological issues in care of neurological patients: transition from paediatric to adult care

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Transitioning....



Parent and child - dependence



Adolescence – desire for independence



Adult - independence

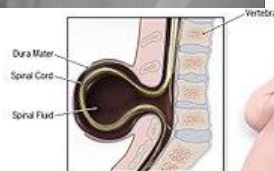
Different issues / Different approaches

Paediatric

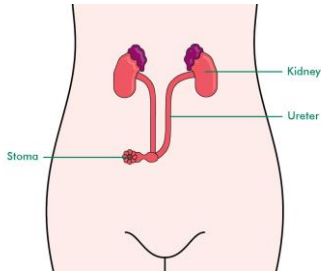
Holistic
Bladder
Bowels
Toilet training
Parent engagement
School and social supports

Adult

“Single organ” model
No wholistic care
Empowers the individual
Who looks after bowels?
Sexuality
Fertility



Bladder management

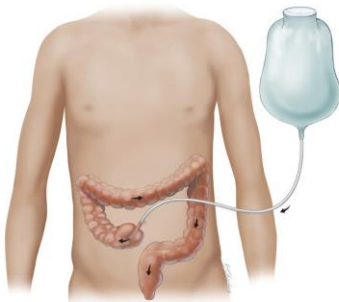


Bowel management

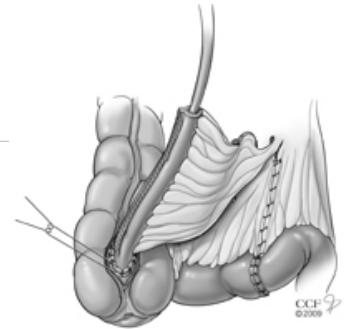
High Fiber foods



Bowel management - ACE



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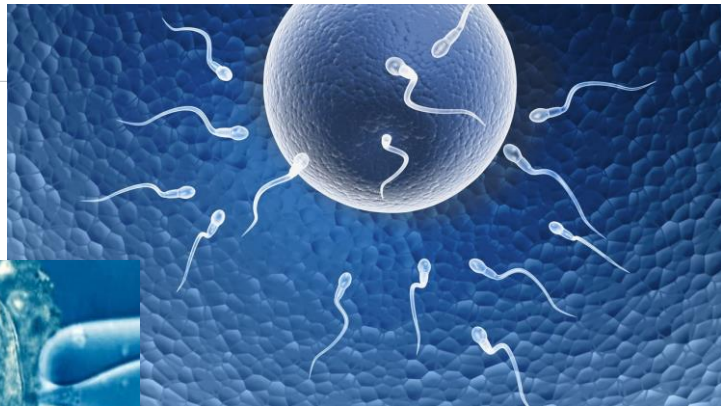
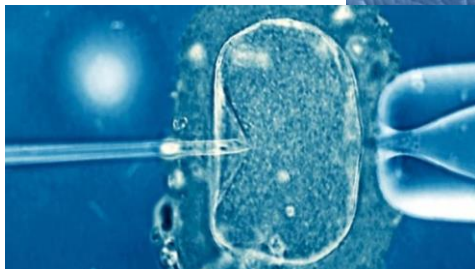
Continence products



Sexuality



Fertility



Levels of transition

Paediatrician -> Rehab physician

Paediatric urologist -> Urologist

Paediatric surgeon -> Adult general surgeon

Paediatric nephrologist -> Adult nephrologist

Child psychologist -> Psychologist / Sexual health specialist

Continence nurse -> School nurse -> District nurse

GP -> GP -> GP

When to start transition...





Transitional clinics –
multidisciplinary care



Urologist /
paediatric urologist

Summary

Multiple areas of transition

Timing should be gradual and planned, not sudden

Multi-disciplinary teams best

Child and adult services together

