Bathing Changes from Pediatric to Adolescent to Adult

Kathryn was a 16 year old high quad, and weighed 130 pounds. Her dad had pulled his back out while attempting to lift her out of her wheelchair to put her onto a bench in the bathtub. He had dropped her more often in recent months, and she really hated even having him involved in her bathing. But, what choice?

Kathryn’s story is not unusual. She was born with her severe disability. From the time she was tiny her parents bathed her and cared for her. But, as we all hope to do, she was getting older. And with that came new challenges, especially for families who cannot remodel a home.

Life care planning is difficult enough in defining all the different types of support devices that will be necessary, but when you add to that the complications driven by increasing age, emotional maturation, increased weight, as well as housing situation, you have challenges in getting their assistive environment defined for a whole lifetime.

Bathing is not the only issue that has implications and changing requirements with age, but it is clearly one of the riskiest for both the individual with the disability and their care giver.

**Safety** needs to be paramount in determining the best short and long term solutions. The ideal situation is obviously one where no lifting or transferring is required. And, there should be no risk of slipping, or scalding. For a small child, water temperature for bathing is the primary issue. But as the child gains weight, lifting and the associated risk of falling or being dropped becomes a concern. Slipping, too, becomes a concern when transfers involve some degree of weight bearing.

There are safe bathing solutions, if re-modeling for accessibility is an option. Floors can be changed to allow for unobstructed wheelchair access, doorways can be opened to allow for even large sized wheelchairs to roll in, shower heads can be lowered to be within easy reach from a seated position, and tubs can be modified or simply accessed differently with special chairs.

To use these solutions, though, you have to be able to do the modifications. For many people with disabilities, home ownership is not an option, so remodeling is clearly not possible. Even for those who do own their own homes, remodeling is expensive. Furthermore, if remodeling is done to care for an adolescent or young adult who may want to move away from home in a matter of only a few years, this becomes a less-than-ideal alternative.

**Bathing effectiveness** needs to be a real concern as well as safety. And this is an issue that again changes with age of patient. A small baby can be washed effectively while sitting in the kitchen sink. But an adolescent unable to access a full bath or shower which offers adequate
water for true skin cleansing, may begin to suffer from increasing skin conditions such as pseudomonas aeruginosa folliculitis (or sponge bath disease).

According to an article in “Updates”, a newsletter from American Ramp Systems, Issue #2, December, 2007,

“Dr. Rick Rader, Editor-in-Chief of “Exceptional Parent” magazine, calls sponge bathing ‘an undesirable health practice’, and reports that ‘studies have shown that a patient is usually microbiologically more contaminated after the bath than before.’

The U. S. Army Research Institute and Walter Reed Army Institute of Research report that ‘long term sponge bathing has been found to be harmful.’

The “Journal of Dermatology” and ”The Journal of Applied Microbiology” report that spongebathing can increase the spread of infections including pseudomonas aeruginosa folliculitis and staphylococcus aureus.”

Spongebathing is probably the least effective for maintaining skin health and basic hygiene. Unfortunately, spongebathing is oftentimes seen as the only real option.

Not to be overlooked is also the emotional challenges of sub-optimal bathing alternatives. Whether it is as simple as sheer embarrassment, as with Kathryn, of having someone else lift your naked body into a tub, or the social ostracizing from poor hygiene or catheter accidents that cannot be cleaned up in a timely and thorough manner, the net result is an emotional toll that able bodied individuals who can shower do not have to face.

All of these issues apply to individuals with disabilities of all ages, and their caregivers. But consider the changes in both concerns and options with aging.

A tiny child with even a serious disability can be bathed in manners not that different from those used with able bodied babies. An adult can usually hold the baby, or put them into a small sink based bathing pan, and do everything necessary. Neither safety nor effectiveness need to be issues.

As the child becomes a little older, bathtubs can still work fine, as long as the caregiver is strong enough to lift the child into the tub, hold them carefully, and still wash them thoroughly to keep their skin adequately rinsed with water to maintain health.

But when the child becomes larger, lifting becomes more of a risk factor for both the child and the caregiver. Bathing positions may become problematic, especially for children who may require some degree of tilt to enable proper breathing, such as a child with cerebral palsy. The caregiver has to manage the transfer, maintain the proper positioning, adequately perform the bathing, and ensure that no problems occur. With a 100 pound plus child who may also be
growing in height to five feet or more, simply handling and maneuvering can be a major challenge.

Not to be forgotten also is the potential for change in the health condition of the child with a disability. Whereas the physical condition may improve with age, too often the years are not kind, and physical disabilities tend to worsen rather than improve. So even if a bathing solution may work early on, decrease in muscle strength in combination with increase in size may force the need for a whole new bathing alternative.

So what choices really exist? The most common, excluding full home re-modeling, include bathtub slides, walk-in tubs, shower attachments for hand-held use, and now, the FAWSsit portable shower stall for use while in a wheelchair. Each of the alternatives has some benefits and some issues.

Briefly, here are some of the pro’s and con’s of the alternatives:

1. Bathtub slides.
   
   Pro’s
   
   Do not require re-modeling or home modification
   
   Relatively low cost
   
   Simple to operate

   Con’s
   
   Require transfers, with attendant risks
   
   Require ability to reach bathtub controls, or risk falls or scalding
   
   Require ability to sit upright without support

2. Walk-in bathtubs
   
   a. Pro’s
      
      i. Individual able to stay seated while bathing

   b. Con’s
      
      i. Need to be able to stand or walk to get in, or risk falling
      
      ii. Have to wait for tub to fill, and to drain while sitting in tub
      
      iii. Require true re-modeling, with plumbing and structural changes
iv. Expensive, due to cost of unit at $10,000 or more, plus re-modeling changes required.

3. The FAWSsit™ Fold Away Wheelchair Shower, (the only patented, legal, portable shower)
   a. Pro’s
      i. Requires no re-modeling or structural changes to the house. Works well for renters or for individuals who do not wish to re-model.
      ii. Requires no transferring from the wheelchair, as the bathing occurs while the patient stays seated in the wheelchair
      iii. Caregivers can assist, from the outside of the shower stall, and stay completely dry, as does the area all around the shower stall.
      iv. Can be used in a kitchen, a bedroom near a bathroom, or any room where there is access within 10-12 feet to a sink. Floors stay dry, but there can be easy access.
      v. Water temperature can be set at the sink before the patient enters the shower stall, so scalding is not a concern.
      vi. The portable shower is lightweight, at approximately 30 pounds total weight, and can be folded flat and easily stored when not in use.
      vii. It is effective, because adequate water can reach all body parts and help ensure that “spongebath disease”, or aeruginosa folliculitis, does not occur due to soap residue buildup, or due to bacteria that cannot be washed away.
      viii. Multiple models available, from standard, to bariatric, to recliner styles, which work for individuals of all ages, from small children to adolescents to adults of all sizes and physical conditions.
      ix. Durable, with projected life spans for the products at 15 years or more, with replacement parts such as shower curtains being readily accessible from the manufacturer. Product component life span projections are available from the manufacturer.
      x. Low cost relative to re-modeling, with models starting at $1995.
   b. Con’s
      i. More expensive than a bathtub slide
In summary, for small children, there are safe and effective bathing alternatives. But it is important to recognize that as they age, their mix of alternatives may change. So from a life care planning perspective, finding solutions that can work for the entire life span are clearly ideal. While a remodeled home is great, even that may not be perfect. Solutions that can work at all ages, can be transported to different locations, or even to different homes over time may be preferable.

When the child becomes an adult, and (with luck) is able to move out and have a home of his or her own, he or she can make the decisions for the best personal solution. In the meantime, it is incumbent upon the caregivers and the life care planners to provide a good solution during the growing years. The best news is that this is now possible for a fraction of the cost of remodeling, and can make spongebathing a horror of the past!

To finish this story, let me tell you about Kathryn now. She has moved from her parents’ rented home into her own apartment. She took her FAWSsit portable shower stall with her and she is able to handle bathing all by herself. She graduated from high school and is now in college with plans to become an attorney representing the needs of individuals with disabilities. And she will tell you that the way she feels now is very different! She no longer feels like “a piece of meat being handled by her parents”, as she says. She is now just a lovely, healthy, clean, happy young woman.

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