

ABSORBENT PRODUCTS FOR INCONTINENCE: IMPACT ON QUALITY OF LIFE.

Hypothesis / aims of study

Living with incontinence is known to have negative effects on quality of life (QOL) [1], but existing continence-related QOL tools are designed to measure treatment effects where some change in symptoms is expected [2]. Where absorbent products (pads) are the primary 'treatment', symptoms of incontinence are not directly influenced by changes in pad features. Nevertheless there is still a need to be able to determine the balance between beneficial effects and less desirable side-effects of pad use. This study aimed : to ascertain how the use and characteristics of absorbent pads impact on women's QoL; to examine the need for a QOL measure for people using absorbent pads and determine key domains/variables for inclusion; and to identify the pad characteristics which impact most strongly on users and should influence new product design and evaluations.

Study design, materials and methods

This study formed one part of a large multi-centre, cross-over trial (conducted from 2002-2006), to compare the performance and cost-effectiveness of the key absorbent product categories for the containment of urinary and/or faecal incontinence.

Stage 1: An initial 'bank' of pad characteristics, considered most important by users, was derived from a critical review of existing published literature and subsequently refined through focus group discussion with 15 volunteers attending a continence 'user group' conference. The resultant set of characteristics was used in a later ranking exercise.

Stage 2: Face-to-face interviews were conducted with 99 women using pads for light incontinence, who were recruited for the main trial. Inclusion criteria were: incontinent of urine at least once a day; daily use of one or more pads; incontinence symptoms consistent and stable. Interviewees were asked about the impact of pad-use on their daily lives and what would make life better. They were encouraged to give examples to help them think about their pad-related QOL and not simply incontinence-related QOL or satisfaction (or not) with pad performance. Women also used a 5-point Likert scale (where 1 represented very important and 5 not important) to rank: (i) the importance of individual pad characteristics to them and (ii) the five most important pad characteristics for day use and for night use. Interviews were recorded with participants' permission, transcribed and subjected to rigorous content analysis.

Results

Analysis of interview data identified a single overarching theme affecting women's QOL. This was defined as 'containing the problem'. Sub-themes embraced physical effects, psychological impact and social functioning but components were closely inter-related. For example, pad-use strongly influenced choice of clothing, self-image and self-confidence. High levels of reported anxiety were associated with perceived risk of pad leakage, lack of discreteness and need for complex regimes for pad management to support social functioning. The pad characteristics ranked most important for day or night time use are shown in Table 1.

Table 1 Pad characteristics ranked most important by users

Top 5 characteristics (day)	% of women (n=99)	Top 5 characteristics (night)	% women (n=81)
To hold urine	83.8	To hold urine	93.8
To contain smell	75.8	To stay in place	77.8
To stay in place	54.5	To contain smell	54.3
Discreteness	41.4	Comfort when wet	54.3
Comfort when wet	40.4	To keep skin dry	48.1

Interpretation of results

Although the ranking exercise demonstrated a clear consensus on the most critical features of pad performance, the focus group and individual interviews showed that measures of pad performance alone are too insensitive to explain the impact of pad use on daily life. Both positive and negative effects of pad use have a strong influence on QOL and the key domains identified provide the basis for development of a QOL outcome measure for pad users, which takes into account the absence of change in symptoms of incontinence. Although the sample was limited to women using products for light incontinence they represented a broad spectrum of ages, physical mobility and length of time using pads. The consistencies of findings suggest that they could be generalisable to a wider population and this will be tested as further data from men and women with moderate to heavy incontinence is analysed.

Concluding message

This study makes an important addition to a previously, very poorly, researched aspect of living with incontinence. The study findings provide the basis for developing a more sensitive, patient-oriented, QOL measure for pad-users which could aid product selection/user satisfaction, new product development and inform future evaluative comparisons between products/products and treatments. We propose that the concept of 'treatment effects' in relation to absorbent pads (or other interventions where change in symptoms is not an expected outcome) is useful and should be exposed to wider discussion.

References

1. Coyne K. et al. (2003). British Journal of Urology International 92; 731-735.
2. Donovan et al. In: Abrams et al (Editors). Incontinence, Vol. 1, p521-584. Health Publication Ltd.2005.

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HUMAN SUBJECTS: This study was approved by the London MREC (MREC 02/02/26) and followed the Declaration of Helsinki Informed consent was obtained from the patients.