

EPIDEMIOLOGY OF FEMALE URINARY INCONTINENCE AND ITS IMPACT ON QUALITY OF LIFE IN THE CLUSTER OF U.K POPULATION

Hypothesis / aims of study

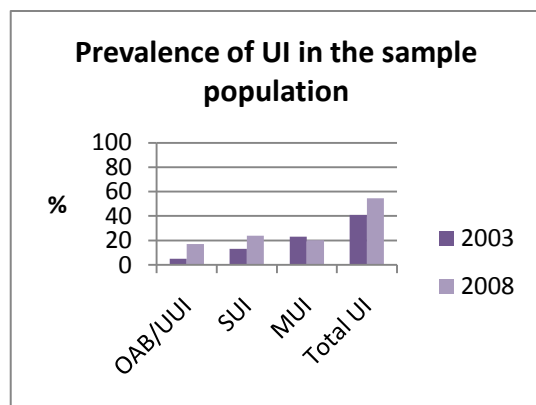
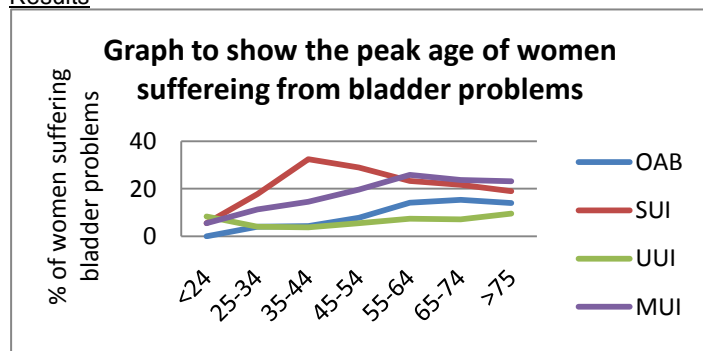
- Urinary incontinence is a common health problem that effects women of all ages, cultures and races. The aim of this study is to establish the prevalence of UI in a cluster population in the U.K and to estimate the prevalence of subtypes of UI. To compare the prevalence to the national standard and to the similar study conducted in 2003. To identify the effect on quality of life and to Identify the portion of the population most at risk in order to direct any potential changes in services to target them

Study design, materials and methods

This was a population based, cross sectional postal survey of all female patients over the age of 21 registered at a medical practice in the UK. The questionnaire was in consistent with ICS-IUGA 2009 terminology. A total of 2414 questionnaire were sent to all female patients over the age of 21 at a local general practice in U.K. in April, 2008 and we had the response from 1463 people. Returned questionnaires were scanned at the clinical auditing department of University Hospital North Staffordshire (UHNS). A random sample of 247 (00 + 10% of responses) were checked individually to ensure accurate scanning.

All statistical analysis was performed using SPSS version 14.0. Prevalence data were analysed in 10 year cohorts. Results are represented as numbers (raw data) and percentages of responders.

Results

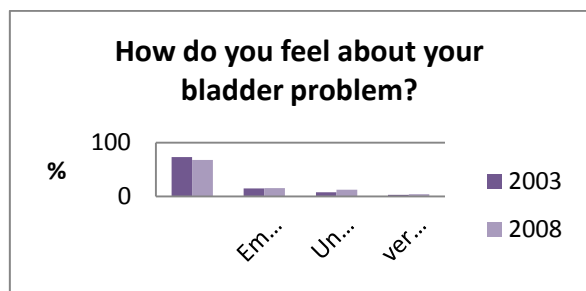
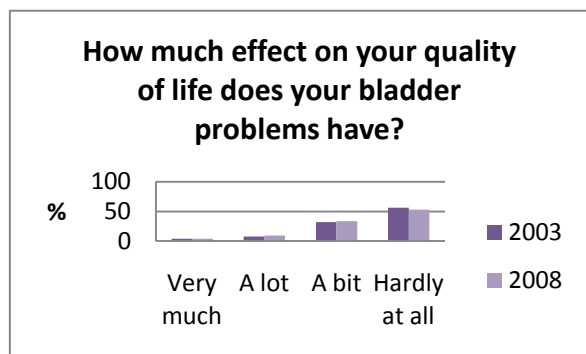


Interpretation of results

Table 1. Summary table of prevalence studies published since 2000.

Author	Irwin <i>et al</i>	Hunksaar <i>et al</i>	McGrother <i>et al</i>	Perry <i>et al</i>	This Report
Year	2006	2004	2004	2000	2008
Prevalence %	13	42	34	20	55
Method	Phone interview	Postal questionnaire	Postal questionnaire	Postal questionnaire	Postal questionnaire
Sample size	1675	2931	50002	10116	1463
Age range	39+	18-97	40->80	40->80	21->75

Mean or median age	18-29	47.1	57	40-49	55-64
Timing	Ever	Last 30days	Last year	Ever	Ever



Concluding message

The literature review to identify the national standard, detected four papers in which the average prevalence of UI was 27% (range 13-42%), prevalence rates as high as 60% have been reported (1). This study identified a prevalence of 55%, this is more than double that of the average of the national standards identified. The study revealed that only 30% of patients who suffered leakage problems sought help, the 70% who did not seek help would be difficult to target. Reasons people do not seek help include: embarrassment and uncertainty of how to broach the subject during a consultation (2), thinking there are no effective treatments, believing UI is an inevitable part of ageing, believing UI is not serious enough to ask for help (3) and fear of invasive procedures and/or surgery. In order to target patients who feel UI is just part of the ageing process the profile of UI needs to be raised. This could be achieved by having more posters and leaflets in doctors waiting and consultation rooms advertising treatments, and again by doctors asking women during consultations and explaining the options available to women. If the GP asks the woman directly about any incontinence problems she maybe having, this will eliminate the uncertainty of how to bring up the subject. By talking to the patient about treatments the GP may be able to lessen the fears of invasive procedures. If GPs were successful in identifying all women that would benefit from using continence services this could have huge financial implications on the NHS.

References

1. The reported prevalence of urinary symptoms in women in one rural general practice. JV., Jolleys. BrJGtn Pract 1990; 40: 335-337.
2. Urinary incontinence in a community-based cohort: prevalence and healthcare-seeking. Roberts RO, Jacobsen SJ, Rhodes T et al. J Am Geriatr Soc. 1998;46:467-72.
3. Urinary incontinence in women from 35 to 79 years of age: prevalence and consequences. Rekers H, Drogendijk AC, Valkenburg H, Riphagen F. Eur J Obstet Gynecol Reprod Biol 1992; 43:229-234.

Specify source of funding or grant	not applicable
Is this a clinical trial?	No
What were the subjects in the study?	NONE