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COMMON BLADDER MANAGEMENT TECHNIQUES AND MECHANISTIC METHODS.

Hypothesis / aims of study

This study investigates the success of intervention techniques tried by a urinary incontinent population.

Study design, materials and methods

A solicitation for participation in a comprehensive health and life assessment was posted on the website of a not-for-profit service provider specializing in assistance to those seeking help with urinary and fecal incontinence. The assessment tool is a self reported web based survey.

The study is not a clinical investigation as outlined in 21CFR, part 56, and falls within compliance of 45 CFR part 46, 101(b2) governing IRB review identifying it as exempt. No identifying information was recorded that can link a respondent to the survey, and all respondents have the opportunity to not participate. The study has been assessed for reliability (Cronbach's alpha = 0.89) and content validity. A sample size of 397 was obtained (Margin of error equals 5%).

Results

Urinary incontinence is a common problem that has a profound impact on quality of life (QOL). Organizations looking to provide assistance to an incontinent population must understand the challenges put to this population. This study investigates the success of intervention techniques tried by a urinary incontinent population seeking help.

Eighty-eight percent of respondents have tried various techniques to manage their bladder problems, such as prescription medications (54%), behavioural techniques (48%), fluid management (40%), scheduled bladder voidings (38%), diet modification (23%), and surgery (14%). Reported success (indicated as having helped, but not cured) ranges between 20-30 percent. Diet modification had the highest self-proclaimed success rate (30%) – this was followed by fluid management (27%), bladder voidings (27%), behavioural techniques (26%), and surgery (26%). Medications had the least self-proclaimed success rate at 22%. There were no significant differences between genders when it came to bladder management techniques attempted.

As a management technique, adult diapers and absorbent briefs were reportedly used more often by males than females. Seventy-three percent of males have used adult diapers, by far the most common method amongst men, followed by 31% of males reporting using other absorbent products. Most common in females were liners, shields or inserts (41%), followed by sanitary pads (29%).

Interpretation of results

Although medication is reported in the sample as the most common method to alleviate symptoms, it was also reported to be the least effective. Regarding management techniques, adult diapers, absorbent briefs, liners/shields/inserts, and sanitary pads are very common.

The majority of respondents have taken measures to control their bladder issues – however, success rates are not optimal. For this sample of the incontinent population, there is no ready formula for defining outcomes when successful medical intervention (that is, the elimination of the problem) is not fully achievable (14.2 percent state they have been told there is no cure for their bladder problems). Therefore, success may be more in the realm of the management of the problem which offers a person increased control over their life, allowing for increased quality of life

Concluding message

Not-for-profit organizations, or other service providers, may best serve their clientele by helping them understand the challenges they face. When confronted with a lack of successful intervention, services may be best directed towards management options.

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| Specify source of funding or grant | Supported by Hollister Incorporated |
| Is this a clinical trial? | No |
| What were the subjects in the study? | HUMAN |
| Was this study approved by an ethics committee? | No |
| This study did not require ethics committee approval because | The study is not a clinical investigation as outlined in 21CFR, part 56, and falls within compliance of 45 CFR part 46, 101(b2) governing IRB review identifying it as exempt. No identifying information was recorded that can link a respondent to the survey, and all respondents have the opportunity to not participate |
| Was the Declaration of Helsinki followed? | Yes |
| Was informed consent obtained from the patients? | No |