

PROMOTING URINARY AND BOWEL CONTINENCE IN OUT PATIENT DEPARTMENT

Hypothesis / aims of study

Incontinence problems consist of urinary incontinence, lower urinary tract symptoms (LUTS), fecal incontinence or constipation. Incontinence of any types affect us through the life span, it affects our quality of life not only physically, but also psychologically, economically and sexually. Despite of increasing incontinence problems with age, incontinence can be managed by early detection and prompt intervention in primary level of health care. In order to identify the population with incontinence problems, screening of incontinence problems was carried out in Out Patient Department (OPD), Hong Kong.

The study aims to survey for the prevalence of incontinence problems among adults in OPD, Hong Kong; and to identify population with incontinence problems.

Study design, materials and methods

A screening questionnaire was employed. Subjects were adults with age above 18. Self administered questionnaires were given to adults, assistance was provided to illiterate or visually impaired adults if necessary. Outcome measures were categorized as (1) Prevalence of incontinence problems, (2) Population with incontinence problems according to gender and age group.

Results

From October 2009 to February 2010, 5032 patients with age 18-99 were surveyed. 41% were male and 59% were female. Among the 5032 patients, 1559 (31%) had urinary problems while 737 (14.6%) had bowel problems.

Generally male patients (33.5%) reported more urinary problems compared with female patients (29.2%). 75.5% male patients reported LUTS were between 56 and 85 years old. For female patients, 83.1% reported urinary problems were between 46 and 85.

Among eight questions regarding urinary problem, frequent urination was found to be the main urinary problem (18.8%).

Regarding bowel problems in 14.6% of the population, more than half of them were female patients (59.7%). Majority of patients with bowel problems (80%) were aged between 46 and 85. Constipation was the main bowel problem (80.9%). For patients who were identified with urinary or/and bowel problems, more than half of them (53.2%) were willing to receive treatment. Slightly more female patients (55.6%) were willing to receive treatment compared with male patients.

Interpretation of results

Among the urinary problems, frequent urination is the most commonly reported urinary problem in 68.3% male patients, especially in their ages between 56 and 75.

54.4% female patients also reported frequent urination but more female patients (60%) reported stress incontinence as their major urinary problems. For female patients with age over 36 reported with urinary problems, 1 in 2 of them reported stress incontinence.

For 737 patients reported problems of constipation, 492 (66.8%) patients reported urinary problems as well. Most of them (84%) were ranged from age 46-85, which showed a correlation between constipation and urinary problems.

Concluding message

Screening of continence problems for patients in community enables nurses to provide prompt intervention, which would greatly improve quality of life of these patients. Through the screening, it highlighted the urinary problems especially frequent urination in male and stress incontinence in female, with age ranged from 46-85. Moreover, more attention should be drawn in these age groups especially for problem of constipation concomitantly with urinary problems. Throughout the screening, it enables patients to increase awareness of their incontinence problems as well as the availability of continence clinic. Hopefully with earlier detection of patient with incontinence problems by screening, earlier nursing care in forms of health education by nurses, especially lifestyle modification, which in turns motivate patients to make a change in lifestyle and take initiative role to improve their quality of life ultimately.

Specify source of funding or grant	Not applicable
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	This study was a prevalence survey
Was the Declaration of Helsinki followed?	No
This study did not follow the Declaration of Helsinki in the sense that	This study was a prevalence survey
Was informed consent obtained from the patients?	Yes