

Hypothesis / aims of study

Stress urinary incontinence (SUI) is a known barrier to sports participation, with up to 45% of female athletes experiencing pelvic floor dysfunction that negatively impacts their engagement in physical activity (1,2). This study explores female runners beliefs, barriers, facilitators, and coping strategies related to SUI.

Study design, materials and methods

A qualitative, exploratory-descriptive study was conducted among 13 female runners in Chile, with ages ranging from 18 years and above. Data were collected through 25-minute semi-structured interviews conducted via Zoom. A thematic analysis, following Braun and Clarke’s six-step approach, identified recurrent themes in the participants' narratives. Data saturation was achieved, and all interviews were transcribed and analysed.



Results and interpretation

Characteristic	N (%)
Total Participants	13 (100%)
Age (Years)	
20-29	4 (30,8%)
30-39	2 (15,4%)
40-49	6 (46,2%)
50+	1 (7,7%)
Running profile	
Begginer	2 (15,4%)
Basic	3 (23,1%)
Middle	3 (23,1%)
Advanced	5 (38,5%)
UI Experience	
Yes	6 (46,2%)
No	7 (53,8%)
UI Type (n=6)	
Stress	4 (30,8%)
Urgent	1 (7,7%)
Mixed	1 (7,7%)
UI Severity (n=6)	
Low	0 (0%)
Moderate	6 (100%)
Severe	0 (0%)
Number of pregnancies and births	
Nulliparous	5 (38,5%)
Multiparous	8 (61,5%)
Birth types	
Vaginal	4 (38,5%)
Caesarean section	2 (15,4%)
Vaginal/C-Section	2 (15,4%)

Six major themes emerged:

Theme 1: High Prevalence of SUI	Theme 2: Predisposing Factors	Theme 3: Coping Mechanisms
SUI was found to be more common among advanced runners and older women than generally assumed. The issue is often underreported due to societal norms.	Lack of pelvic floor training, pregnancy, childbirth, and the jarring motions from running were identified as significant contributors to SUI.	Many runners manage SUI by using menstrual products or limiting fluid intake before runs, but these are seen as temporary, short-term solutions.
<i>"I've noticed it's something we don't talk about, but a lot of women in my group have it, especially the older ones."</i>	<i>"I didn't even know about pelvic floor training before, and after having my child, it just got worse."</i>	<i>"I use pads, and it helps for now, but it's not ideal. I just try not to drink water before I run."</i>
Theme 4: Knowledge Gaps About Treatment	Theme 5: Normalisation of SUI	Theme 6: Role of Physiotherapy
There was a significant lack of awareness about physiotherapy as a long-term management option for SUI, with hesitation about seeking treatment due to unfamiliarity.	Advanced runners considered SUI to be a normal part of running, even though it negatively affects their activity.	Some participants recommended pelvic floor physiotherapy as a sustainable solution for managing SUI while continuing running.
<i>"I wasn't even aware there were therapies for this. I just thought it was something I had to deal with."</i>	<i>"It's just part of running at this point. You get used to it."</i>	<i>"Once I started working on my pelvic floor, I felt more in control. It's something I'd recommend to others."</i>

Conclusion

SUI remains a taboo subject among female runners, impacting their participation in physical activity. Temporary measures are often preferred over seeking professional treatment. Destigmatising SUI and promoting physiotherapy as a long-term solution are crucial for increasing female participation in running and other physical activities.

References

1. Dakic, JG., Hay-Smith, J., Lin, KY., Cook, J., Frawley, HC. "Experience of Playing Sport or Exercising for Women with Pelvic Floor Symptoms: A Qualitative Study." Sports Med Open, 2023.

2. Caetano, AS., Tavares, MDCGCF., Lopes, MHBDM. "Urinary incontinence and physical activity practice." Revista Brasileira de Medicina do Esporte, 2007.