Lack of knowledge about symptoms and treatment options of urinary incontinence (UI) in men and women with chronic obstructive pulmonary disease (COPD)

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1. Hypothesis / aims of the study
To investigate the symptoms of urinary incontinence (UI) and to evaluate the awareness of treatment in male and female patients with chronic obstructive pulmonary disease (COPD). The objective of this study was to determine the awareness of symptoms of UI and if these gaps would lead to reduced use of treatment options. It was hypothesised that low information level might be associated with diminished initiation of adequate treatment in case of UI.

2. Study design, materials and methods
This cross-sectional study included 115 participants with COPD recruited by a mailing survey and 767 participants with COPD recruited by an online survey. One hundred and thirteen participants, who underwent lung resection because of lung cancer stage I served as control group. The presence or absence of UI, the type of symptoms of stress urinary incontinence (SUI), urge urinary incontinence (UUI) and mixed urinary incontinence (MUI), and the International Consultation on Incontinence Questionnaire (ICIQ-UI-SF) were recorded. Furthermore the awareness and realization of treatment options in case of UI was evaluated.

3. Results
59.1% (68/115) in the participants with COPD of the mailing survey and 84.9% (652/768) in the participants with COPD of the online survey reported symptoms of UI compared to 38.9% (44/113) in the control group. Stress urinary incontinence (SUI) was the dominant type of UI in both COPD-groups compared to controls and formally published data of normal population [1]. Results for different types of UI are summarized in table 1.

4. Interpretation of results
UI was very common in men and women with COPD. The dominance of SUI could result from cough related increase in intraabdominal pressure. There was low level of knowledge about treatment options and diminished initiation of adequate treatment in case of UI.

5. Concluding message
Health professionals - pneumonologists and chest physical therapists - should be aware of UI as a vastly underreported comorbidity in patients with COPD. Affected patients should be informed about treatment options for UI, especially about the effective pelvic floor muscle training as first line treatment. This should be part of routine physical examination in health care.

References

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