

PHYSIOTHERAPY INTERVENTION IN STRESS URINARY INCONTINENCE AFTER PROSTATECTOMY

Hypothesis / aims of study

Prostate cancer is the leading cause of death in males. It is more common in men over 50, and usually causes no symptoms in the early stages; in more advanced stages symptoms may include: urinary outflow obstruction, hematuria, dysuria, pain during ejaculation and increase in prostate volume⁽¹⁾.

According to the National Cancer Institute (NCI) in 2014 is estimated to occur in Brazil 68,800 new cases for this type of cancer⁽²⁾.

Surgical treatment indicated is radical prostatectomy and it may cause, as a complication, urinary incontinence and erectile dysfunction. The pelvic floor physiotherapy, through the resources of electrostimulation, perineal exercises and behavioral rehabilitation, is indicated for the treatment of post-prostatectomy complications⁽³⁾.

Objective: To investigate the intervention of physiotherapy on urinary incontinence patients who underwent radical prostatectomy.

Study design, materials and methods

The study included 26 patients aged between 60 and 80 years (mean = 68 years) from January 2012 to December 2013, with post-prostatectomy urinary incontinence. Functional evaluation of the pelvic floor (AFA) and Pad Test were performed, and also applied the International Consultation on Incontinence Questionnaire - Short Form (ICIQ-SF) before and after treatment. Treatment consisted of weekly sessions (15-20) and anal and surface electrical stimulation, concomitantly with active perineal exercises and behavioral rehabilitation. The parameters used for the first 5 sessions were: frequency (F) 35 Hz, pulse width (T) 500µs, intensity (i) according to the sensitivity of the patient.

Results

The mean number of treatment sessions was 12.6 sessions, with a minimum of 6 and maximum of 19 sessions. After physical therapy, 17 patients were continent, 2 patients progressed from very severe to light urinary incontinence, 1 patient from very severe to moderate incontinence, 1 from very severe to severe and 5 patients from moderate to light incontinence.

Concluding message

The physiotherapy intervention by electrical stimulation, concomitant with active perineal exercises, associated with behavioral rehabilitation in the treatment of stress urinary incontinence post-prostatectomy, has achieved satisfactory results in reducing and/or cure the symptoms of urinary incontinence.

References

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3. Goode PS; Burgio KL; Johnson TM; et al. Behavioral therapy with or without biofeedback and pelvic floor electrical stimulation for persistent postprostatectomy incontinence: a randomized controlled trial. *JAMA* 305(2):151-9, 2011.

Disclosures

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