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WEIGHT GAIN AND INCIDENCE OF URINARY INCONTINENCE IN WOMEN DURING PREGNANCY

Hypothesis / aims of study

Obesity appears to play a role in the pathophysiology of urinary incontinence, as well as contributing to their severity. The body weight gain during pregnancy seems to increase the pressure on the structures of the pelvic floor, causing tension with a chronic weakening of these structures (1,2). The purpose of this study was to investigate the relationship between weight gain and the occurrence of urinary incontinence in women during pregnancy.

Study design, materials and methods

Study of descriptive, exploratory, quantitative approach. For data collection, we used the International Consultation on Incontinence Questionnaire - Short Form (ICIQ - SF), the Body Mass Index (BMI) before pregnancy and second stratification Curve Rosso (3) at the end of pregnancy. The study interviewed women volunteers from December 2008 to February 2009 on the same day delivery still being hospitalized in materiadade. The study included 22 postpartum women with a mean age of 26 years (19 -35 years). Database of absolute weight gain at the end of pregnancy and ICIQ - SF were analyzed by Spearman correlation coefficient.

Results

43 women were evaluated postpartum admitted to the Maternity, but only 22 were suitable for the research. Reported being incontinent 63.6 % of the volunteers, being half of multiparous and 42.8 % in overweight / obesity in early pregnancy according to pre-pregnancy BMI criteria and 35.7 % at the end of pregnancy and stratification Rosso curve. The absolute weight gain was inadequate for 62.5 % of pregnant women continents, of these 60.0 % underweight and 40.0 % overweight suggested by WHO. For incontinent women, 78.5 % had inadequate weight increase during pregnancy, 18.2 % were with absolute weight gain of less than optimal

and above the 81.0 % absolute weight. Weight gain at the end of pregnancy was significantly associated with the presence and perception of the severity of urinary incontinence in women (p < 0.05) (Figure 1). The interference in daily life was considered, according to the incontinent voluntary, by 14.3% as mild, moderate for 28.6 %, to 42.8 % severe, and very severe for 14.3% of this group.



Figure 1 - Association between weight gain and perceived severity of urinary incontinence in pregnant women.

Interpretation of results

The results suggest that weight gain favors urinary incontinence in women who exceed the margin of weight to your prepregnancy nutritional status, and the negative impact on the daily lives of incontinent women.

Concluding message

Urinary incontinence may be related to inadequate weight gain, especially for overweight e obesity.

References

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Disclosures

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