

CURRENT STATE OF DISEASE INSIGHT AND HEALTH-CARE SEEKING BEHAVIOR AMONG WOMEN WITH URINARY INCONTINENCE: DATA FROM A KOREAN SURVEY

Hypothesis / aims of study

To evaluate disease insight, personal distress, and healthcare-seeking behavior of women with urinary incontinence (UI) to improve women's health in Korea.

Study design, materials and methods

In October 2012, 500 Korean women residing around Seoul, Incheon, and Gyeonggi-do were selected by random sampling for a population-based cross-sectional survey conducted by computer-aided telephone interview. Sixteen questions, which included information on demographic characteristics, information sources, disease insights, and general health-seeking behavior, were used for data collection.

Results

From whom the information of UI was received within past 3 months?

Source	Age (yr)					Urinary incontinence		Normal delivery	
	Total (n=162)	30–39 (n=39)	40–49 (n=43)	50–59 (n=47)	60–64 (n=33)	Experienced (n=47)	Naïve (n=115)	Experienced (n=113)	Naïve (n=49)
TV/Radio	83.3	84.6	93.0	83.0	69.7	78.7	85.2	80.5	89.8
Friends	34.0	17.9	23.3	51.1	42.4	51.1	27.0	38.1	24.5
Magazine	16.0	20.5	16.3	12.8	15.2	10.6	18.3	17.7	12.2
Internet	14.8	25.6	14.0	17.0	-	17.0	13.9	11.5	22.4
Family	11.7	10.3	9.3	10.6	18.2	10.6	12.2	12.4	10.2
Hospital	6.2	5.1	4.7	12.8	-	6.4	6.1	5.3	8.2
Etc.	2.5	2.6	-	2.1	6.1	-	3.5	2.7	2.0

	Age (yr)				
	Total (n=491)	30–39 (n=138)	40–49 (n=140)	50–59 (n=137)	60–64 (n=76)
UI is a natural outcome of aging or childbirth					
Agree	77.2	79.7	81.4	73.0	72.4
Disagree	13.4	12.3	13.6	12.4	17.1
Normal activity including mild exercise is restricted by UI					
Agree	77.0	77.5	77.9	74.5	78.9
Disagree	16.7	18.1	20.0	13.9	13.2
Social activity is restricted by UI					
Agree	48.7	35.5	42.9	57.7	67.1
Disagree	42.8	58.7	50.0	29.9	23.7
UI could be handled by the use of protective products					
Agree	60.3	74.6	67.1	48.9	42.1
Disagree	24.2	18.1	20.7	33.6	25.0
UI could be overcome by the use of exercise or diet control					
Agree	58.9	68.8	59.3	54.7	47.4
Disagree	16.1	14.5	16.4	16.8	17.1

Questions 13 to 16	Age (yr)				
	Total (n=117)	30–39 (n=18)	40–49 (n=33)	50–59 (n=44)	60–64 (n=22)
13. Do you feel discomfort because of UI?					
Yes	50.4	50.0	42.4	52.3	59.1
No	47.0	50.0	57.6	43.2	36.4
14. Has your participation in activities decreased					
Yes	20.5	21.1	12.1	25	31.8
No	76.9	88.9	84.8	72.7	63.6
15. Have you ever neglected your UI because of shame?					
Yes	25.6	22.2	18.2	29.5	31.8
No	72.6	77.8	78.8	70.5	63.6
16. Have you ever hesitated to buy protective products for UI?					
Yes	12.0	21.1	-	11.4	31.8
No	54.7	72.2	75.8	36.4	45.5

Interpretation of results

Among the responders, 23.8% experienced UI, the prevalence of which increased with increasing age; 83.3% knew about UI through the mass media out of 98.2% apprehended people. Regarding general awareness of UI, 77.2% understood that UI is caused by aging. A total of 48.7% of subjects experienced societal restrictions because of UI. Most women in their 30s (25.6%) in the acquired UI information from the Internet, while those in their 50s and 60s (50–59 years, 51.1%; 60–64 years, 42.4%) learned about UI through friends. Among subjects who did not have UI, 89.37% intended to see a doctor or consult a professional if they developed UI (83.2%). Among those with UI, however, only 59.0% had talked about UI; 79.7% had talked with friends or associates, whereas only 23.2% had consulted a professional.

Concluding message

Most respondents tended to obtain information on UI through the mass media. Subjects who did not have UI expressed their intention to consult a professional if they developed UI, while the percentage of subjects with UI who had consulted a professional was very low. Many women are ashamed of UI in Korea, which may be changed by providing efficient advertising with the right information and establishing a new perception of UI.

References

1. Lee YS, Lee KS, Jung JH, Han DH, Oh SJ, Seo JT, et al. Prevalence of overactive bladder, urinary incontinence, and lower urinary tract symptoms: results of Korean EPIC study. *World J Urol* 2011;29:185- 90.
2. Kocak I, Okyay P, Dundar M, Erol H, Beser E. Female urinary incontinence in the west of Turkey: prevalence, risk factors and impact on quality of life. *Eur Urol* 2005;48:634-41.
3. Altaweel W, Alharbi M. Urinary incontinence: prevalence, risk factors, and impact on health related quality of life in Saudi women. *Neurourol Urodyn* 2012;31:642-5.

Disclosures

Funding: none **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** This study was performed in accordance with the protocols of the Korea University Ansan Hospital Ethics Committee **Helsinki:** Yes **Informed Consent:** Yes