

INNOVATIVE INTERDISCIPLINARY MODEL OF CARE; CONSERVATIVE MANAGEMENT OF THE PROLAPSE AND INCONTINENT PATIENT MOVES FROM TERTIARY TO PRIMARY CARE

Hypothesis / aims of study

Show that prolapse and incontinent patients can be successfully managed at the primary care level of health care increasing accessibility, convenience and decreasing wait times.

Determine if adequate referrals will be generated to maintain a part time clinic.

Determine how many of these women require referral to tertiary care for surgery.

Study design, materials and methods

A female GP with an interest in women's health initiated a continence and prolapse management clinic within her family practice with the assistance of a Nurse Continence Advisor (NCA). The clinic was set up to be able to assess and manage women with incontinence and prolapse through conservative management utilizing recognized successful therapies involving dietary management, pelvic floor exercise and pessaries. The clinic utilized ultrasound to determine the patient's pre and post void residuals as required.

Referrals to tertiary care for urodynamic studies and surgical consults were tracked and collated to determine what percentage of patients required further assessment and treatment.

Physicians and patients were surveyed to determine satisfaction with the service.

Results

- NCA working 0.4 FTE saw 691 patients between April 1, 2014 and April 1, 2015; 215 were new patient assessments and 476 were follow up reviews.
- Referring physicians expressed that their patients who were seen and treated in the clinic were pleased with the treatment received, with the results and with being offered treatment in their home community.
- Referrals increased steadily and referrals were also received from urology and gynaecology once they were aware of the services offered.
- Physician survey results were positive and numbers will be reported once all the data has been collected.
- Patient survey results were consistent with other research that has reported high patient satisfaction with conservative management treatment by nurses and GP's.

Interpretation of results

Continence and prolapse assessment and management can be initiated in the GP office with appropriate education and training and/or the assistance of a qualified NCA.

The patients reported that they were pleased with: accessibility; short wait times; being seen in the community; less stress not having to travel or arrange transportation into the city; parking less expensive; and they are also pleased with the results of being managed conservatively.

Concluding message

GP's and specialized continence nurses in primary care manage incontinent and prolapse patients successfully.

The patients are pleased to be seen in their community, not having to travel to a large complex care centres to receive care.

A small percentage of these patients require referral for further intervention.

The referring physicians are grateful to have the patients seen in a shorter time period and referrals have increased steadily.

Disclosures

Funding: None **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** Review of charts, outcome analysis of a new model of care. **Helsinki:** Yes **Informed Consent:** No