Ma W S P
1. Queen Mary Hospital, University of Hong Kong

DISCLOSURE OF FAECAL INCONTINENCE IN PATIENTS WITH URINARY SYMPTOMS

Hypothesis / aims of study
To assess the willingness of disclosure of faecal incontinence in patients who already presented to urogynaecology clinic for urinary symptoms. We hypothesized that even when the patients sought help for their urinary symptoms, they would be less likely in disclosing their symptoms of faecal incontinence.

Study design, materials and methods
We performed a retrospective chart review on women who attended a local urogynaecology clinic for urinary symptoms from 2013 to 2014. Medical records were reviewed. Demographic data including age, marital status, parity, education level and employment status were recorded. Their response to the Pelvic Floor Distress Inventory (PFDI) were checked. Those who answered "yes" to question 36 to 39 were considered to suffer from faecal incontinence and their bothersome of symptoms were noted. Their written response were compared to their response to the physician’s direct enquiry during the consultation.

Results
During the period of study, 225 records were reviewed. 30 (13.3%) of them did not have information on faecal incontinence documented at the consultation note. 119 (52.8%) patients did not report faecal incontinence on both questionnaire and face-to-face interview. 76 (33.8%) of them reported faecal incontinence on questionnaire. However, only 6 of them disclosed the symptoms to the attending doctor. No statistical significant difference was found when comparing the demographic data including age, education level, parity and employment status of those who disclose the symptoms both orally and from the questionnaire (Group 1) with those who only disclose their symptoms at questionnaire (Group 2). Degree of bothersome between both groups were also studied since it was believed that patients with more severe symptoms may be more willing in disclosing their symptoms verbally. Surprisingly, the mean score of the PFDI was found to be 5.17 +/- 2.99 and 5.29 +/- 3.66 for Group 1 and Group 2 respectively (P>0.05).

Interpretation of results
Faecal incontinence is common among patients who were suffering from urinary symptoms. Patients were more readily in disclosing their symptoms in written form rather than orally irrespective of the severity of symptoms and the bothersome brought by the symptoms. Although there could be similarity between the pathophysiology of urinary symptoms and faecal incontinence, nearly one-fifth of patients did not have this assessed by the attending physicians. This may signify low suspicion index of faecal incontinence by doctors.

Concluding message
Embarrassment and fear of stigma could act as barriers to the help seeking of the patients. Health education and promotion of the possible management of the condition may help in breaking the obstacles for patients in seeking medical advice. Moreover, training of doctors concerning faecal incontinence would help in raising the concern of the issues and offer help to this group of patients.

Disclosures
Funding: not applicable Clinical Trial: Yes Public Registry: No RCT: No Subjects: HUMAN Ethics not Req’d: this is a secondary analysis of the existing data of a study which has been approved by the ethics committee and is a retrospective study Helsinki: Yes Informed Consent: No