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PREVALENCE, CORRELATES, AND RELATIONSHIP TO QUALITY OF LIFE OF URINARY INCONTINENCE IN FEMALES WITH BREAST CANCER

Hypothesis / aims of study

Previous studies showed that urinary incontinence could be a concern for females diagnosed with breast cancer. This gap necessitates more research on urinary incontinence among females with breast cancer in Asia. This study investigated the prevalence, correlates, and relationship to health related quality of life (HRQL) of urinary incontinence in a sample of females diagnosed with breast cancer.

Study design, materials and methods

This study was a cross-sectional, questionnaire survey. Two hundred Taiwanese females diagnosed with breast cancer were recruited from one hospital in Taipei, Taiwan. We collected information about each participant's individual characteristics, lower urinary tract symptoms, and HRQL. Descriptive statistics were used to demonstrate the distribution of collected information. Chi-squared tests and a multivariate logistic regression were used to identify correlates of urinary incontinence. Student's *t* test was used to compare the mean HRQL scores for participants with and without urinary incontinence.

Results

Of the 200 participants, 41 (20.5%) experienced urinary incontinence. Chi-squared tests revealed that participants who had a body mass index equal or more than 24.0 Kg/m² (28.6% vs. 16.8%, p = 0.05), who had given birth \geq 3 times (34.5% vs. 15.2%, p = 0.002), or who experienced urgency (39.1% vs. 18.1%, p = 0.019)/intermittent stream (38.5% vs. 17.8%, p = 0.015)/weak urinary stream (35.9% vs. 16.8%, p = 0.008) were more likely to have experienced urinary incontinence than those who were in the other groups. Three significant correlates of urinary incontinence (p < 0.05) were identified. Participants who had given birth \geq 3 times (OR = 2.97, 95% CI = 1.38, 6.37, p = 0.005), who had experienced urgency (OR = 2.85, 95% CI = 1.06, 7.68, p = 0.038) or weak urinary stream (OR = 2.55, 95% CI = 1.11, 5.87, p = 0.028) had a higher odds of experiencing urinary incontinence than those who were in the other groups. Participants with urinary incontinence had lower HRQL mean score than participants without at the mental component summary HRQL (45.67 vs. 49.47, p = 0.045) and role limitation caused by emotional problems (47.97 vs. 49.76, p = 0.038).

Interpretation of results

Urinary incontinence was common among females diagnosed with breast cancer, and it might have a negative effect on individuals' mental related HRQL.

Concluding message

While the beneficial effects of non-drug lifestyle management and behavioural interventions on urinary incontinence have been reported, identifying correlates of urinary incontinence is helpful in developing adequate interventions to improve symptom management and optimize HRQL for females with breast cancer.

References

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