EFFICACY AND HEALTH RELATED QUALITY OF LIFE IMPROVEMENT BY PELVIC FLOOR MUSCLE EXERCISE IN HONG KONG FEMALE PATIENTS WITH STRESS URINARY INCONTINENCE

Hypothesis / aims of study
This study aimed to evaluate the efficacy and improvement of health related quality of life (HRQOL) for Hong Kong female patients with stress urinary incontinence (SUI) after pelvic floor muscle exercise (PFME) training under urology nurses’ supervision.

Study design, materials and methods
All female patients who were referred to the urology nurse clinic from April 2011 to July 2012 for SUI were included for analysis. Those who had overactive bladder only were excluded. The patients were taught PFME at the first visit and were followed up at 1st, 3rd, 6th, 9th and 12th month. At each visit, detailed history taking, one-hour pad test, UDI-6, IIQ-7 and OAB-V8 questionnaires were performed. The data were prospectively collected.

Results
86 patients were included for analysis with the mean age 58.9 years old. There were 59.9% patients who had urinary incontinence for more than 2 years and 41.2% patients had worsening of incontinence over the 6 months before the first visit. Before the training, they had leakage of 9.3gm urine in 1-hour pad test and had mean pad use of 1.3 pads/day. The pad use before the training had been underestimated their severity as 72.1%, as patients did not use or taught to use light pads for protection. The 1-hour pad test results is associated with worse HRQOL in travel (p=0.018) and social / relationships (p=0.016). There were significant improvements in 1-hour pad test (mean =5.6gm, p=0.025), UDI-6 total score (p=0.000), IIQ-7 total score (p=0.000) at the 3rd month visit and further improvements were noted at 12th month visit. Overall, the patients perceived 74.3% improvement at 12th month follow up.

Interpretation of results
The pelvic floor muscle exercise training under urology nurses’ supervision can significantly reduce stress urinary incontinence for Hong Kong female patients.

Concluding message
Stress urinary incontinence caused bothersome to patients by urinary incontinence and adversely affecting their HRQOL. PFME under urology nurses’ supervision, as a noninvasive mean of treatment, provided significant improvement in their continence and quality of life.

Disclosures
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