

## INCONTINENCE, A NEGLECTED PROBLEM: HOW CAN WE GET BETTER? A SYSTEMATIC NURSING APPROACH

### Hypothesis / aims of study

Urinary and faecal incontinence are highly prevalent, impair patient's health related quality of life (QoL) and cause a relevant economic burden. Though, about half of the affected patients do not seek professional help whereby misinterpretation of symptoms, misbeliefs in successful treatments and shame are common reasons.

A hospital stay may be an opportunity to identify incontinence and offer appropriate information about possible management. Therefore, our aim was to evaluate the current model of care and to assess the prevalence of incontinence to determine a baseline for improvements.

### Study design, materials and methods

This study included qualitative and quantitative healthcare assessments and was conducted by nurse specialists at a single centre university hospital in Switzerland. Qualitative assessments consisted of interviews with different care providers/disciplines (n=17) to evaluate the current practice of care and to develop new models. For quantitative assessments, a prevalence analysis of self-estimated impairment due to incontinence was conducted with hospitalised patients (n=589, mean age 65 years, female 207, male 239), using a likert scale. The assessment was embedded in an annually national performed audit of nursing phenomenon in 11/2016.

### Results

Qualitative analysis revealed that except from experts urinary and faecal incontinence was a difficult subject to address for health professionals due to neglect and lack of knowledge about possible interventions. For quality improvement nurses (n=87) were trained, to assess incontinence problems.

76 % (446/589) of patients agreed to undergo quantitative analysis. The prevalence for urinary, faecal and mixed incontinence was 22% (99/446), 11% (47/446) and 7% (28/446), respectively. There was no significant difference between gender (p>0.05). Of all incontinent patients 29% (50/174) reported no relevant impairment in QoL, 18% (32/174), 7% (12/174) and 14% (24/174) stated a light, moderate and strong impairment, respectively, from 56 patients no statement was available.

Overall, 42% (186/446) of all enrolled hospitalised patients were dependent on auxiliary devices for urinary or faecal problems (absorbing pads 20% (94/446), indwelling catheter 19% (83/446) and stoma 2% (9/446)).

### Interpretation of results and concluding messages

The prevalence of incontinence was comparable with results from other developed countries. Qualitative interviews revealed the difficulty for care givers as well as for patients to address these problems. Specific training and a systematic approach enhanced the competence and awareness of health professionals and enable patients to find help. Therefore, we emphasise that a hospital stay is an opportunity to systematically identify incontinent patients and offer appropriate information by the interprofessional health care team about this relevant but often neglected burden.

### Disclosures

**Funding:** none **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** University Hospital Basel, annually performed audit of nursing phenomenon and quality improvement **Helsinki:** Yes **Informed Consent:** Yes