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Abstract Reproduction Form B-1

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Institution City Country	University of Leicester, Leicester, UK.
Title (type in CAPITAL LETTERS)	THE PREVALENCE OF SYMPTOMATIC FORMS OF URINARY INCONTINENCE IN A COMMUNITY POPULATION OF ADULTS AGED 40 YEARS OR MORE.

Aims of Study: The ICS committee for the standardisation of terminology of lower urinary tract function identified six symptoms indicative of symptomatic forms of urinary incontinence(1). These are: urge incontinence, stress incontinence, unconscious incontinence, enuresis, postmicturition dribble and continuous leakage. In addition, the U.S. Department of Health and Human Services recognises mixed incontinence and functional incontinence(2). Although many studies on the prevalence of urinary incontinence have been carried out, few have made distinctions between these different symptoms(3). Symptomatic classification in this area has tended to focus on stress, urge and mixed incontinence in women(4). The aim of this study was to establish the prevalence of symptomatic forms of urinary incontinence which have international recognition.

Methods: In a cross-sectional survey, 27,811 adults aged forty years or more and living at home were randomly selected from the Health Authority register and asked to complete a postal questionnaire developed by the study team. Five percent (n=1507) of the sample were excluded from the sample frame because persons no longer lived at the address, were deceased or had moved to a residential home. The response rate to the questionnaire was 65% (n=17146). Definitions for measuring the different types of urinary leakage are given in Table 1. This study reports only on leakage occurring several times a month or more often. For some symptoms, two prevalence estimates are provided: the first denotes general reportage (any leakage), and the second reportage of this symptom only(isolated leakage).

Results: Prevalence estimates of different symptoms of urinary incontinence are shown in Table 1. Overall, 22% of adults (27% of women and 17% of men) reported urinary incontinence. Mixed, stress and postmicturition dribble (any) were most common in women. Postmicturition dribble (any and isolated), followed by urge incontinence were most common in men. Isolated postmicturition dribble was rare in women compared to men. As expected, small numbers reported isolated unconscious, functional and continuous incontinence. Apart from stress incontinence, the prevalence of different types of leakage tended to increase with age.

Conclusions: Precise definitions of the symptomatic forms of urinary incontinence do not exist. A consensus on agreed thresholds and definitions to identify symptomatic forms of urinary incontinence is required. Prevalence in the older age groups is probably underestimated because those living in residential and nursing homes were excluded from the survey. Further work will assess the association between symptomatic types of urinary leakage and felt need for health care.

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Table 1. Definitions and prevalence of symptomatic forms of urinary incontinence

Type of leakage (Monthly+)	Definition	Prevalence Women (n)	Prevalence Men (n)
Any type of leakage	Any of the below	26.6 (2264)	16.7 (1218)
Stress	Stress and no urge	7.9 (709)	0.4 (27)
Mixed	Stress and urge	11.2 (997)	1.5 (112)
Urge	Urge and no stress	4.7 (421)	4.3 (325)
Unconscious (isolated)	Unconscious and no other leakage	0.1 (12)	0.1 (6)
Continuous (any)	Continuous	1.3 (126)	0.5 (40)
Continuous (isolated)	Continuous and no other leakage	0.1 (5)	0.1 (6)
Functional (any)	Functional	3.3 (293)	1.9 (146)
Functional (isolated)	Functional and no other leakage	0.2 (13)	0.1 (8)
PMD (any)	PMD	10.5 (942)	14.2 (1078)
PMD (isolated)	PMD and no other leakage	1.6 (134)	8.7 (636)

PMD=postmicturition dribble

References

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4. Sandvik H. (1995). Female urinary incontinence. Studies of epidemiology and management in general practice. University of Bergen, Norway.