



Category No. 12

Video Demonstration

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Abstract Reproduction Form B-1

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LETTERS)

QUALITY OF LIFE IMPACTS AFTER TWO AND MORE
FAILED INCONTINENCE SURGERY.

Aims of study. There is no general agreement about the surgical procedure of choice for women with genuine stress incontinence, but there is agreement about the most unfortunate adverse effect after bladder neck surgery- failure to cure stress incontinence.

The goal of this study was to investigate quality of life in women who have had two or more failed incontinence operations and compare quality of life between different age categories.

Methods. The study group comprised female incontinent patients enrolled for collagen transurethral injections. History, examination, urodynamic studies and 1 hour ICS pad test were performed. Urodynamic inclusion criteria were a stable bladder (on filling and provocation) and urethral sphincter weakness. All women were asked to complete a generic (Short Form-36) quality of life questionnaire; higher scores on the questionnaire correlating with a higher quality of life. In order to compare quality of life through the age spectrum, patients were divided in two age categories: up to 50 years and over 50 years. Domains of quality of life were compared using the unpaired t-test.

Results. During the study period 52 patients underwent collagen transurethral injections. 41 had had two and more previous failed incontinence procedures and these are the patients that were evaluated. Among the women up to 50 years, one patient had had three bladder neck surgeries. Of the patients over 50 years, six of them had had 3 bladder neck procedures and three had even 4 operations. The mean duration of urinary incontinence in the younger group was 8.3 years (range: 2-20). In the group over 50 years of age the mean duration of incontinence was 14 years (range 1.5-34). The following table displays the generic QOL domains comparing the two groups [mean (SD)].



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Quality of life domain	Study group 50 patients mean SD	Mean score for patients with incontinence	Study group 50 patients mean SD	Mean score for patients with incontinence	p-value for comparison of the study groups
Physical	56 (23)	84	55 (24)	74	0.931
Psychic	47 (44)	83	47 (45)	72	0.984
Bodily	86 (24)	77	54 (31)	73	0.007
General	60 (15)	70	62 (18)	65	0.767
Health	50 (18)	59	50 (20)	59	0.950
Social	77 (35)	87	74 (20)	84	0.965
Mental	66 (19)	72	65 (21)	74	0.871
Emotional	81 (34)	82	58 (42)	80	0.136

No differences were found between the two age groups in their general health perceptions apart from the finding that older women had considerably reduced scores in the domain of bodily pain. In a healthy population there is a significant trend for the younger age group to have higher scores in all domains than their older counterparts(1). This is not demonstrated in our study. Moreover, the scores in all domains for this group of patients, irrespective of age, appear to be reduced in comparison to the scores of a healthy population.

Conclusions Previous studies have shown that women with urinary incontinence are usually in good health, and therefore scores on generic quality of life questionnaires are generally high (2). Our study suggests that failure to cure stress incontinence causes significant impairment of quality of life with impact on general health. We expected that youngest women would cope with incontinence better but our study showed that actually these patients suffer more.

References

(1)BMJ 1992;305:160-4

(2)Curr.Opinion Obstet.Gynecol.1995 Oct;7(5):404-408

Quality of life domain	Study group < 50 years (9 patients)	Mean score for similarly aged healthy women	Study group ≥ 50 years (32 patients)	Mean score for similarly aged healthy women	p-value for comparison of the study groups
Physical functioning	56 (23)	84	55 (24)	74	0.931
Physical role	47 (44)	83	47 (45)	72	0.984
Bodily pain	86 (24)	77	54 (31)	73	0.007
General health	60 (15)	70	62 (18)	65	0.767
Vitality	50 (18)	59	50 (20)	59	0.950
Social functioning	77 (35)	87	74 (20)	84	0.965
Mental health	66 (19)	72	65 (21)	74	0.871
Emotional role	81 (34)	82	58 (42)	80	0.136

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Conclusions. Previous studies have shown that women with urinary incontinence are usually in good health, and therefore scores on generic quality of life questionnaires are generally high (2). Our study suggests that failure to cure stress incontinence causes significant impairment of quality of life with impact on general health. We expected that youngest women would cope with incontinence better but our study showed that actually these patients suffer more.

References

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