Author(s)

J FORDYCE, R THAKAR, K WANG, S STANTON

Institution, city, country

Urogynaecology Unit, St. George's Hospital, Blackshaw Road, London

Title (type in CAPITAL LETTERS, leave one blank line before the text)

THE EFFICACY OF PHYSIOTHERAPY FOR URINARY INCONTINENCE IN A TERTIARY REFERRAL CENTRE

Aim of the study: Physiotherapy has been recommended as the first line of treatment for genuine stress incontinence. We aimed to assess the effectiveness of physiotherapy undertaken by the women's health physiotherapy department in a tertiary referral teaching hospital.

Methods: - Data was analysed retrospectively on 206 women referred to the physiotherapy unit for urinary incontinence between 1998-1999 from the urogynaecology unit. Objective goals were set by the physiotherapist and the patient based on the findings of initial assessment. Minimum number of visits was 6. If the patient did not achieve the set goals or wished further help she was given further appointments. Goals were assessed using subjective outcomes through a questionnaire and objective outcomes by digital vaginal examination.

Results:. The mean age of the women was 55 years. Seventy one percent of women had a normal vaginal delivery, 8% had LSCS, 15% had an assisted delivery. Forty three percent had stress incontinence, 17% had urge incontinence, 38% had mixed and 2% had prolapse. Complete goals were achieved by 53% and partial goals by 14% of women within 6 treatment cycles. In women who had more than 6 treatment episodes complete goals were achieved by 28% and partial goals by 5% of women. After referral from the clinic 70 women failed to complete their treatment. Twenty-four of these did not attend at all and the rest did not attend as they were due for surgery or decided they did not wish physiotherapy. Eighty four percent had objective assessment by digital vaginal examination before treatment and 55% after treatment. Improvement was seen in 92% and 8% remained the same.

Conclusions:

Physiotherapy is an effective first line treatment for urinary incontinence. Although almost half the women who were offered physiotherapy did not attend for treatment, of those that attended 83% achieved complete goals and were fully continent. The implication of this finding is that physiotherapy is an excellent first line non-invasive treatment in women who are strongly motivated. Reasons for non-attendance by defaulters needs to be explored as the high success rate achieved by physiotherapy demonstrated in this study should encourage uptake of this form of treatment.