Aims of Study

The pelvic floor muscles are acknowledged as important contributors to the extrinsic continence mechanisms. By improving the function of these muscles through pelvic floor exercises, it may reduce or potentially prevent incontinence (1) The fact that over 40% of women fail to contract the pelvic floor muscles emphasized the need for continence promotion. (2)

Pregnancy provides a valuable opportunity to address and promote continence. As mentioned, pregnancy makes women more prompt to the problem. The frequent contact with health professionals making the promotion message easier to get through. Vaginal examinations during antenatal visits provide an ideal opportunity for assessment of the functional capacity of pelvic floor muscles. Feedback and advice can be offered to individual woman accordingly.

There has not been any local data on incontinence during and after pregnancy. Opportunistic continence promotion is taken among individual cases only. Aims of this study are:

- To investigate the prevalence of pelvic floor dysfunction amongst a group of perinatal mothers
- To study the scope of continence advice given by health care professionals during pregnancy, and the extent of pelvic floor muscle assessment during vaginal examinations
- To examine women's attitude to continence advice and assessment of pelvic floor muscle during pregnancy.
- To investigate the feasibility of routine “continence promotion” questionnaire as an integral component of post-natal physiotherapy care.

Methods

This is a retrospective study conducted in the obstetric ward. All postpartum women received a questionnaire on day 2-post delivery. These questionnaires were delivered and collected by the same physiotherapist. Exclusion criteria applied to those who not speak or read neither Cantonese nor English. Those who suffered from post-natal emotional problem as well as with poor neonatal outcome were not included. The questionnaire investigates the prevalence of constipation, urinary and faecal incontinence before pregnancy. Attitudes towards pelvic floor examination and education were also assessed. Any pelvic floor examination as well as testing of the pelvic floor contraction had to be recalled.

Results

615 women had completed the questionnaire. There was no significance difference in their demographic data. The mean age of them is 29.26 years. 7% of them suffered from urinary incontinence. 25% had constipation. Only 1.6% women suffered from faecal incontinence. 20% of women had the pelvic floor contraction taught and checked. 99% women agreed that pelvic floor education should be lodged in their childbearing year. Only 6 % women found it quite embarrassed with pelvic floor examination. 26%of women had the pelvic floor exercise taught by physiotherapist and nurse taught 20% of them.

Conclusions

Prevalence of constipation is comparable with other countries (3). This phenomenon had been neglected in our culture and further investigations as well as emphasis should be placed in this area. Continence promotion is definitely not enough in our country as well. Not many women had been educated on pelvic floor exercise even though they are not too embarrassed with pelvic floor examination. Post-natal physiotherapy should include the pelvic floor re-education as the integral part of teaching as well.
References

