

LONG-TERM RESULTS OF PHYSIOTHERAPY FOR WOMEN WITH URINARY STRESS INCONTINENCE

Aims of Study

To determine the long-term effects of physiotherapy in women with urinary stress incontinence according to severity.

Methods

46 women (age, 33 to 78 years) – underwent a pelvic floor reeducation program for 8 weeks. All women were referred by urologists after urodynamic testing and a 1-hour-pad test; 19 had a history of surgery for incontinence. 15 women had grade 1, 24 grade 2, and 7 grade 3 stress incontinence according to the Ingelman-Sundberg classification. Treatment consisted of pelvic floor exercises, intravaginal biofeedback, and electric stimulation. The home training program was reevaluated at each of the 8-12 visits. Muscle strength tests, intravaginal manometry and the pad test were used at baseline, after 8 weeks of therapy and 1 and 4 years after treatment. Subjective results were assessed with a visual analogue scale. Continence was defined as no urine loss in the 1-hour pad test and no pad use in daily life.

Results (Table).

Grade 1 SI. 13 women were objectively dry after 8 weeks of physiotherapy, and this result was maintained at 12 months and 4 years. One patient was improved at the 1-hour pad test but not completely dry.

Grade 2 SI. 13 women achieved complete continence after 8 weeks of physiotherapy and 7 were able to maintain this result at 4 years. 11 women were improved which they could hold through the years which showed the examination after 4 years. Three women underwent surgery.

Grade 3 SI. None of the 7 women achieved complete continence but reduced by 50% or more urine loss was associated with improved quality of life. Two women underwent surgery.

		Continent / Improved		
	n	8 weeks	1 year	4 years
Grade 1	15	14. / 1	14. / 1	14. / 1
Grade 2	24	13. / 11	6. / 18	7. / 15
Grade 3	7	0 / 7	0 / 6	0 / 4

Conclusions

These results indicate that mild stress incontinence in women can be cured with physiotherapy alone and that quality-of-life can be improved in patients with more severe stress incontinence.