402

Anwar T. ¹, Kiwanuka A. ², Sankey S. ¹
1. Henry Ford Health System, Detroit, USA 2. Tameside General Hospital, Ashton-u-Lyne,UK

AN ASSESSMENT OF THE QUALITY OF LIFE FOLLOWING THE BURCH COLPOSUSPENSION OPERATION

Aims of Study

To determine the quality of life after the Burch Colposuspension operation.

Methods

We used reliable and validated questionnaire for outcome analysis and evaluation of the long-term effects of the out comes on the patients' quality of life (QOL). Two hundred and sixty-seven patients were identified who underwent the Burch Colposuspension operation between January 1991 and December 1995 at Tameside General Hospital, United Kingdom.

Results

Of the 267 patients, 229 (85.8%) returned the questionnaire, 10 of whom opted not to participate. A total of 175 (80.3%) patients reported themselves to be cured of incontinence, or at least improved. However, there were cases in which patients felt that their condition had not improved (14.7%) or was even worse (5.0%). To assess the relationship between quality of life factors and the patients' self-reported improvement status, 10 measures were classified into 2 by 2 contingency tables (Table 1). Each measure was dichotomised into a positive and negative group and cross tabulated based on whether the patient felt they were improved or not. In the group reporting that they had no need for pads, 146 out of 161 (90.7%) described themselves as cured or improved. In the group which needed pads, only 29 of 57 (50.9%) felt they were improved or cured. A very strong association was seen for the question of improved social life. For those reporting an improved social life, 151 of 158 (95.6%) reported being cured or improved, while the rate of improvement in the group without a better social life was only 24 out of 60 (40.0%).

A formal quantitative assessment of the strength of association between each of the 10 selected quality of life measures and patients' self-perceived improvement was done using chi-square tests of association and odds ratios (Table 2). While all factors were significant (p < 0.05), the strength of association varied somewhat. The odds ratio point estimates indicated that the strongest relationships between a patients' perception of being cured or improved and quality of life measures were: an improved social life (32.36), better urinary control (31.89), improved shopping (28.91), lack of dribbling (12.34) and no need for pads (9.40). Although highly significant, the least strong associations were seen for nocturnal urination (4.25), abdominal pain (3.77), urinary frequency (2.97) and strained urination (2.71).

Conclusions

More than two thirds (80.3%) of the patients who underwent Burch Colposuspension at our institution were cured or had significant improvement over the long term. We believe that questionnaire-based outcome studies more accurately reflect patient satisfaction.

Table 1. Quality of Life Factors Class	sified
by Self-Reported Improvement State	us

	Self-Reported Status	
Quality of Life Measures	Cured/ Improved n (%)	Not Improved/ Worse n (%)
Urinary Control (n=180)	11 (1-1)	
Dry Always/Dry Except With Vig Actv	141 (91.0)	14 (9.0)
Dry Except With Slight Actv/Wet Always	6 (24.0)	19 (76.0)
Need for Pads (n=218)	,	, ,
No	146 (90.7)	15 (9.3)
Yes	29 (50.9)	28 (49.1)
Urinary Frequency (n=217)		, ,
Every 3 hours or more	111 (87.4)	16 (12.6)
Less than every 3 hours	63 (70.0)	27 (30.0)
Nocturnal Urination (n=216)		, ,
2 times or less per night	157 (84.0)	30 (16.0)
3 or more times per night	16 (55.2)	13 (44.8)
Strained Urination (n=215)		, ,
Never	141 (84.4)	26 (15.6)
Sometimes/Always	32 (66.7)	16 (33.3)
Dribbling (n=216)	,	, ,
Never	65 (97.0)	2 (3.0)
Sometimes/Always	108 (72.5)	41 (27.5)
Abdominal Pain (n=214)	, ,	ì
No	93 (90.3)	10 (9.7)
Sometimes/Yes	79 (71.2)	32 (28.8)
Improved Social Life (n=218)	, ,	, ,
Yes	151 (95.6)	7 (4.4)
No	24 (40.0)	36 (60.0)
Improved Shopping (n=218)	, ,	, ,
Yes	152 (95.0)	8 (5.0)
No	23 (39.7)	35 (60.3)
Painful Intercourse (n=147)	, ,	
No	92 (91.1)	9 (8.9)
Sometimes/Yes	26 (56.5)	20 (43.5)

Table 2. Strength of Association Between Quality of Life Factors and Self-Reported Improvement Status					
Quality of Life Measure	Chi-Square	Odds Ratio	95 % Confidence Interval		
	p-Value	Estimate	Lower	Upper	
Improved Social Life	<0.0001	32.36	12.93	80.95	
Urinary Control	<0.0001	31.89	10.94	92.94	
Improved Shopping	<0.0001	28.91	11.94	70.02	
Dribbling	<0.0001	12.34	2.89	52.72	
Need for Pads	<0.0001	9.40	4.47	19.76	
Painful Intercourse	<0.0001	7.86	3.20	19.32	
Nocturnal Urination	0.0003	4.25	1.86	9.75	
Abdominal Pain	0.0004	3.77	1.74	8.14	
Urinary Frequency	0.0015	2.97	1.49	5.94	
Strained Urination	0.0062	2.71	1.30	5.64	