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EVALUATION OF INCONTINENCE QUALITY OF LIFE (I-QOL) SUBSCALES IN PATIENTS SUFFERING FROM DETRUSOR OVERACTIVITY(DO):IMPACT OF SACRAL NEUROMODULATION

Aims of Study

Sacral neuromodulation has been used as an effective way to treat LUTS. We know from previous studies how much urinary incontinence (UI) globally affects QoL: patients affected by UI due to DO frequently report a limiting behavior and social embarrassment anecdotally. Aim of this study is to investigate the influence of sacral neuromodulation (SNM) on quality of life (QoL) in general and on avoidance and limiting behavior, psychosocial impacts and social embarrassment in patients who underwent to a permanent implant using a validated domain specific QoL questionnaire.

Methods

From May 1998 to September 2002 226 pts (76 males, 150 females, mean age 53 years) affected by lower urinary tract symptoms, were enrolled in a National prospective registry after a permanent implant of a sacral nerve neurostimulator. Seventy-one pts affected by urinary urge incontinence (55 idiopathic, 16 neurogenic) were asked to complete a validated self reporting incontinence domain specific questionnaire (I-QoL) before and after 3 to 24 months post permanent implant. The questionnaire consists of 22 questions, for each a ranking 1-5 is assigned, the score is sum and then normalized in a 0-100 scale in which 0 is the lower QoL level. We analyzed into the questionnaire (as previously reported by Patrick and others, Urology 53-1:1999) three subscales to verify not only the global improvement of QoL but also formal and quantitative impact of SNM on behavioral and psychosocial field.

Results

Compared with the baseline the QoL index significantly improved at each follow up visit and strongly correlated with the decrease in number of incontinence episodes and pads use at a mean follow up of months. Analysis of subscales showed also a significant improvement in avoidance and limiting behavior, social embarrassment and psychosocial impacts (Tab. 1). Number of daily incontinent episodes decrease from 6.6 at baseline to 0.5 at last follow-up in non neurogenic group and from 5.8 to 2 in neurogenic group.

Tab.1. **Total I-QoL and subscales scores in implanted patients at 24 mos follow-up**

	I-QoL Total	Avoidance behavior	Psychosocial impact	Social Embarrassment
Non neurogenic BASELINE	33	35	36	25
Non neurogenic 24 mos follow-up	83	84	86	75
Neurogenic BASELINE	38	43	38	28
Neurogenic 24 mos follow-up	50	59	50	38

Conclusions

As previously reported SNM is effective therapy for urge incontinence due to DO and has a positive impact on patients' QoL. From our new insight it has a particular influence on psychosocial impacts and social embarrassment with a good correlation with clinical outcome. Also pts with some incontinence episodes and using 1 pad a day regain self consideration and have a quite normal social life and a psychological well being.

