

THE USE OF A “PENILE” PAD FOR THE EVALUATION OF MALE URINARY INCONTINENCE USING THE ICS 1-H PAD TEST

Aims of Study

The assessment of urinary incontinence is based on subjective (questionnaires) and objective (pad-test) methods [1]. As perception of incontinence varies among patients, different pad-tests offer a more reliable means of assessment. The 1-hour pad-test recommended by the International Continence Society (ICS) is a simple, and inexpensive instrument, with an acceptable degree of reproducibility [2]. As different pads absorb different amounts of urine, and the surface of the pad in contact to skin influences the total weight gain due to perspiration, a standard pad with minimal contact to skin is expected to offer better presentation of the actual degree of incontinence. Aim of the present study was to evaluate the use of a “penile” pad (Conveen drip collector[®]) in the ICS 1-h pad test.

Methods

Forty-two consecutive patients with incontinence in the early period after radical prostatectomy were subjected to pelvic muscles exercises using either biofeedback or verbal instructions as learning tools. The patients were randomly assigned to these two groups (2:1) and evaluated at baseline and at 1, 2, 3 and 6 months, using a questionnaire (number of incontinence episodes/24h, number of pads used/24h) and the 1-h ICS pad-test using a special pad. This pocket-like pad with dimensions 14 X 8.5 cm, weight 7.8 gr. and a retention capacity of 80 ml (Conveen drip collector[®]) minimizes the influence of perspiration on weight gain during the test, allowing a uniform inter- and intra- patient evaluation. Statistical analysis was performed using Student's t-test and Wilcoxon non-parametric test to assess differences between the two groups.

Results

Patients compliance was 100%. The Conveen drip collector[®] was used in all but four patients due to retracted penis or amount of incontinence in excess of 80 gr. In these cases, an ordinary pad was used. The Conveen drip collector[®] was also used during the normal daily activities and proved very convenient and highly acceptable by the patients.

		Biofeedback N=28	Verbal instructions N=14	p-value
Baseline	Pad-test (gr.)	39 (30.6)	30.7 (25.8)	0.54
	No of pads/24h	3.9 (1.1)	3.6 (1.1)	0.69
1 st month	Pad-test (gr.)	18.0 (22.1)	10.6 (11.2)	0.38
	No of pads/24h	3.4 (5.8)	1.8 (1.1)	0.17
2 nd month	Pad-test (gr.)	6.5 (11.4)	3.0 (4.1)	0.47
	No of pads/24h	1.2 (1.1)	0.9 (1.0)	0.39
3 rd month	Pad-test (gr.)	3.7 (9.9)	1.3 (2.7)	0.84
	No of pads/24h	0.8 (1.0)	0.4 (0.5)	0.32
6 th month	Pad-test (gr.)	3.1 (8.1)	0	0.20
	No of pads/24h	0.4	0.2	0.66

Conclusions

The use of Conveen drip collector[®] achieves an easy and accurate objective assessment of incontinence, using the 1-h ICS pad-test. Also, this specific pad allows a reliable presentation of subjective degree of male urinary incontinence, and we encourage its use at home for patients with mild to moderate urine loss.

References

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