187

O' Donnell M¹, Hunskaar S¹, Sykes D², Voss S²

1. Section for General Practice, University of Bergen, 2. Eli Lilly and Company Limited, Lilly Research Centre

HELP-SEEKING BEHAVIOUR AND ASSOCIATED FACTORS AMONGST WOMEN WITH URINARY INCONTINENCE (UI) IN FRANCE, GERMANY, SPAIN AND THE UK

Hypothesis / aims of study

To assess the proportion of women who consult their doctor about UI and investigate factors associated with help-seeking behaviour in France, Germany, Spain and the UK.

Study design, materials and methods

A two-stage postal survey of adult community dwelling women in each country. 29,500 women received a 13 item questionnaire assessing the prevalence, type and previous treatment of UI. A randomly selected sub-sample of 2,953 women with UI received a more detailed questionnaire. Demographic, general health care and incontinence variables were explored in relation to help-seeking behaviour. Descriptive and bivariate analyses were carried out. P values were derived from the Chi-square test for proportions. Statistical significance was accepted at the 5% level (p < 0.05).

Results

Initial survey: 58% of women responded to the first survey. Overall 31% reported consulting a doctor about their UI with consultation rates being significantly higher in France (33%) and Germany (40%) than in Spain (24%) and the UK (25%) [p <.001]. Significantly higher consultation rates were found in the overall sample and in each individual country sample in women who were older, had mixed incontinence and used pads for their UI (p≤.001).

Follow up survey: Fifty-three percent of women responded to the follow up survey. Women with stress or mixed incontinence, using pads and consulting a doctor about their UI were more likely to respond to the follow up survey showing some degree of selection bias. Consultation rates analyzed by characteristics of incontinence symptoms from the follow-up survey are shown in Table 1.

	France	Germany	Spain	UK	All
	n=331	n=406	n=340	n=496	n=1573
Consultation rate ^a	43	42	27	25	34
Mild severity	39	36	23	17	28
Moderate\Severe severity	61	68	43	49	56
p value	p=.001	p=.000	p =.001	p=.000	p=.000
Not at all\slightly bothersome	45	35	19	14	27
Moderately\very\extremely bothersome	40	52	35	37	41
p value	p=.394	p=.001	p=.001	p=.000	p=.000
UI same\better	44	36	24	20	31
UI worse	50	63	43	36	46
p value	p=.444	p=.000	p=.008	p=.000	p=.000
Duration (years) <3 ≥3 <10 ≥10 p value	34 48 61 p=.002	37 46 49 p=.116	18 35 33 p=.003	21 24 43 p=.000	27 38 47 p=.000
Nocturia at least once\night	54	56	28	34	43
No Nocturia	41	35	26	20	30
p value	p=.042	p=.000	p=.790	p=.002	p=.000
UI accident evident to other people	60	53	39	31	43
No UI accident evident to other people	39	36	23	21	29
p value	p=.001	p=.005	p=.004	p=.014	p=.000

Table 1 Percentage of women who consulted a doctor about UI and UI characteristics

a p < 0.001 for France's and Germany's consultation rates compared to Spain and UK

For the overall sample and in each individual country sample higher UI consultation rates were found in women who perceived their UI as moderate\severe (p < 0.001) and who had experienced a UI accident that might have been evident to others (p < 0.05). Significantly higher consultation rates were found in the overall sample and in 3 of the 4 individual country samples in women who found their UI moderately\very\extremely bothersome, as having got worse, who had UI for 3 or more years, and experienced nocturia.

Consultation rates analysed by women's attitudes to health care and UI are presented in Table 2. Significantly higher consultation rates were found in the overall sample and each of the individual country samples in women who thought one should try to do everything one can for a health condition before consulting a doctor (p < .05), who were willing to stay on a prescription medication for extended periods of time (p < .001) and who disagreed that UI would get worse as a natural result of aging no matter what they did (p < .005).

Table 2. Percentage of women who have seen a doctor about their UI and their attitudes towards healthcare and UI: data from the follow up survey.

		France	Germany	Spain	UK	All
Start a conversation with a doctor about delicate or embarrassing topics p value	Likely Unlikely	48 29 p=.016	46 39 p=.215	30 25 p=.358	27 16 p=.015	38 28 p=.000
I put off going to the doctor until I absolutely have to p value	Agree Disagree	47 42 p=.469	44 42 p=.826	24 25 p=.765	28 24 p=.417	34 34 p=.968
You should try to do everything you can for a health condition before consulting a doctor p value	Agree Disagree	62 39 p=.016	55 39 p=.028	40 24 p=.017	36 20 p=.002	46 31 p=.000
I am not willing to stay on a prescription medication for extended periods of time p value	Agree Disagree	28 56 p=.000	35 63 p=.000	14 39 p=.000	12 61 p=.000	21 55 p=.000
I have accepted my leakage or involuntary loss of urine as part of my life p value	Agree Disagree	30 46 p=.063	43 43 p=.954	23 27 p=.486	18 28 p=.028	30 36 p=.045
My leakage or involuntary loss of urine will get much worse as a natural result of aging no matter what I do p value	Agree Disagree	39 71 p=.001	38 62 p=.001	25 54 p=.002	19 36 p=.001	30 51 p=.000
Leakage or involuntary loss of urine is just a natural part of growing older p value	Agree Disagree	50 41 p=.233	47 37 p=.083	30 27 p=.601	24 24 p=.891	36 32 p=.135
It helps me to talk with my friends or family about my leakage or involuntary loss of urine p value	Agree Disagree	43 37 p=.326	36 46 p=.107	30 27 p=.626	19 37 p=.001	29 39 p=.001

Interpretation of results

A third or more of women in France and Germany have consulted a doctor about UI compared to a quarter or less of women in the UK and Spain. Factors others than age, type, duration and women's perception of UI severity are associated with help-seeking behaviour including other UI characteristics and women's attitudes towards health care and UI.

Concluding message

Differences in consultation rates exist between France, Germany, Spain and the UK. Certain factors associated with consulting a doctor about UI were common in all four countries.

Funding

Eli Lilly and Company Limited