

POSTPARTUM URINARY INCONTINENCE: REGIONAL PREVALENCE AND THE IMPACT OF TEACHING PELVIC MUSCLE EXERCISES TO PREGNANT WOMEN WITH UI

Aims of study

Urinary incontinence is accepted as a key concern for older women, but little emphasis is placed on this issue for younger women, specifically pregnant and postpartum women when bladder function is particularly stressed. As a preliminary step to a wider education strategy, a study of the prevalence of incontinence in pregnant and postpartum women was undertaken in a maternity registration clinic.

Study design, materials and methods

During a six-month period, women attending a pre-partum maternal registration clinic were asked to consent to participate in a survey regarding bladder control issues including stress and urge loss of urine before and during pregnancy. Women who indicated loss of urine during pregnancy were randomly assigned to 1:1 teaching about pelvic floor exercises (intervention group) or conventional care (hand-out information about pelvic muscle exercises). Chart audits were completed following delivery to identify any factors that may contribute to the development of incontinence. All of the participants were mailed questionnaires regarding their bladder control at 1 month, 6 months and 12 months postpartum.

Results

In total, 705 women consented to participate and were interviewed. The prevalence results were, 17.2% (pre-pregnancy), 58.2% (during pregnancy), 31.3% (1 month postpartum), 25.2% (6 months postpartum) and 33.42 % (1year postpartum). A regression model that included maternal and birth variables, indicated that caesarean section, previous large baby and incontinence during pregnancy as significant predictors of ongoing incontinence. Group comparisons of the women reporting incontinence during pregnancy revealed that, by one month, the intervention group were more likely to have tried pelvic muscle exercises ($p = <.004$), and felt that the exercises were helpful ($p = <.0005$). At 1 year, fewer women in the intervention group noted urgency symptoms (3.4% vs. 13%, $p = <.019$). Written comments were invited on the questionnaires and thematic analysis uncovered stress incontinence to be especially problematic in the first two time periods. The most prevalent comments in the postpartum questionnaires related to the acceptability of pelvic muscle exercises and issues with stress and urgency symptoms.

Interpretation of results

The combination of both quantitative and qualitative findings has laid the groundwork for the next steps that include improved assessment of continence in young and pregnant women, an education approach that is sensitive to women's predominant symptoms and a communication plan for professionals and the public alike about the silent burden of incontinence in younger women.