

## **PREVALENCE OF ANORECTAL DYSFUNCTION IN THE GENERAL FEMALE POPULATION**

### **Hypothesis / aims of study**

Anorectal dysfunction and especially anal incontinence can be one of the most psychologically and socially debilitating conditions in an otherwise healthy individual. It can lead to social isolation, loss of self esteem and self confidence. It is an under reported and unvoiced condition and the prevalence is probably underestimated.

The aim of this study therefore was to assess the prevalence of different bowel symptoms (constipation, anal incontinence, faecal evacuation dysfunction) and urinary symptoms in the general female population. We aimed also, to ascertain whether women sought medical advice regarding their bowel or urinary symptoms.

### **Study design, materials and methods**

All women attending colposcopy clinics and general gynaecology clinics in a district general hospital in the South West of England were invited to participate in the study. In addition, women attending the local family planning clinic were also recruited. All participants gave informed consent to take part in the study, which received local ethics committee approval. Women attending these clinics routinely completed a history sheet and were asked to complete the Birmingham Bowel and Urinary Symptoms Questionnaire (BBUSQ-22). Known risk factors (obstetric history including operative vaginal deliveries, gynaecologic surgeries, medical history, and voiding history) were evaluated and its relative risks were determined. Hospital notes were examined for patient demography.

### **Results**

One-hundred and twenty women participated in the study: 113 women correctly completed the questionnaires and the remaining 7 patients were excluded from the statistics. The mean age was 40 years (range 18-55 years). The mean parity was 2 (range 0 - 6). 65% had at least one bowel symptom from the Questionnaire; 26.5% of women thought they had a bowel problem but only 12% consulted their family doctor regarding the problem. 22% thought they had a urinary problem but only 16% consulted their doctor and 4% were referred for specialist opinion. One patient with faecal incontinence discussed her problem with her midwife but no further action was taken since she was too embarrassed to discuss with her doctor. 24.4% of patients were free of all symptoms. 16% of women complained of constipation, 58% complained of faecal incontinence, 56% complained of faecal evacuation dysfunction and 44% of patients had urinary symptoms. 35.5% of those who admitted to urinary incontinence also had anal incontinence. The mode of delivery as well as previous surgery did not have any influence on urinary incontinence nor on anal incontinence.

### **Concluding message**

This study has demonstrated a high prevalence of bowel symptoms in the general female population. It also confirmed that they are under reported. Because of embarrassment, patients with faecal incontinence generally do not report this to a physician until the symptoms are psychologically and physically incapacitating. This has also elucidated the need to ask patients about urinary or anal incontinence in a simple standard method with high patient acceptability. This study is still ongoing and patient recruitment continues. The final results will be presented at the conference.