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Shepherd H¹

1. Salford Royal Hospitals NHS Trust

WOMEN'S PERCEPTION OF URINARY INCONTINENCE: WHAT THEY CONSIDER IMPORTANT WHEN EVALUATING THEIR OUTCOME FOLLOWING PHYSIOTHERAPY FOR INCONTINENCE

Hypothesis / aims of study

This study aimed to explore women's perception of urinary incontinence and what they consider important when evaluating their outcome following conservative management.

There are a number of Quality of Life questionnaires that were developed specifically for incontinence that give in-depth insight into the condition and its effect. Whilst these give an excellent indication of the effects of incontinence on daily life; demonstrate changes that occur following treatment and how much these symptoms bother the patient, they fail to address the patient's individual concerns, feelings and perceptions about the treatment they received and its outcome.

Study design, materials and methods

The population studied were patients referred to physiotherapy with a history of incontinence, who have completed treatment under a Senior Physiotherapist in the previous twelve months. This incorporated patients with different outcomes, including those that had failed to complete treatment.

Unstructured in-depth telephone interviews were undertaken using a purposive sample of women (n = 18) with the spectrum of urinary incontinence symptoms. Letters were sent out to twenty-eight patients. Nineteen patients returned signed consent forms, however, one patient was non-contactable therefore eighteen women were interviewed. The interviews were recorded and transcribed verbatim. Analysis involved searching for themes and relating them to available literature. Each of the key themes was illustrated using the women's own words.

Results

Key themes identified:

- 1. Barriers which inhibit the women from seeking help
- 2. Perceptions that the women have of incontinence
- 3. Limitations incontinence imposes on their lives
- 4. Poor knowledge of the treatment options available
- 5. Treatment leads to increased feelings of control, coping and self esteem

Interpretation of results

The major findings of this study are that perception of incontinence, knowledge of treatment options and access to services affect help seeking behaviour. Treatment gives an understanding of their problem. This in turn leads to an increase in awareness, self-esteem, confidence and control.

These changes in how the women feel about their problem demonstrate that there is perceived to be a positive outcome even when there is not a resolution in symptoms. When evaluating incontinence how the women feel about their problem should be included with the quality of life questions and symptom questions to enable a holistic approach to evaluating care and outcome.

The effect incontinence has on an individual can be devastating. One woman described it as 'shameful to not have control of your body' and others described how it limited their daily activities.

There is poor knowledge of the prevalence, causes and management of incontinence. Lack of knowledge about incontinence and the feeling that it occurs as a normal part of the ageing process, leads women not to seek help until the problem can no longer be controlled or there is a fear that control is going to be lost. This in turn means women are not seeking help early. Also the problem is often not managed well. They would rather buy sanitary towels than continence pads as they feel these are more 'normal' and do not want to admit that they are incontinent, even to themselves. This was demonstrated in the interviews where only one

woman referred to her problem using the word 'incontinent.' There is still felt to be a stigma attached to incontinence because of the poor understanding of what causes it and the feeling it is an 'old woman's' problem.

Arising from the poor knowledge of incontinence is the poor knowledge of the treatment options, including physiotherapy, for the treatment of incontinence.

All the women interviewed gave positive feedback about the treatment they received. The women appeared to value the relationship that develops with the therapist and felt at ease to discuss their problem openly. The information given gave them an understanding of their problem and that incontinence is not something to be ashamed of.

The women spoke of being 'in control' as one of the positive outcomes of treatment. Control gave them greater 'confidence' to function normally, which leads to increased self-esteem. For some this meant that they could now find work or go on holiday abroad, things they had felt unable to do previously because of their symptoms.

Concluding message

Incontinence continues to be perceived as a normal part of the ageing process and because of this women do not seek help until they can no longer manage it. These perceptions must be changed to enable timely access to treatment.

The findings of this study are to be used to develop a tool to be used with TELER (Treatment Evaluation by A Le Roux's method) (1) to evaluate outcome. It will be a in the form of a questionnaire and will also include questions about symptoms and quality of life. Further research will be required to validate and assess the outcomes arising from it.

Reference

1 (1992). TELER information pack. 4th ed. Sheffield. TELER.