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UNDERSTANDING AND ASSESSING WOMEN'S PERCEPTIONS OF THE OUTCOME OF SURGERY FOR URODYNAMIC STRESS URINARY INCONTINENCE.

Hypothesis / aims of study

(1) To explore women's perceptions of the outcome of surgery for urodynamic stress urinary incontinence. (2) To explore discordant subjective and objective outcomes.

Study design, materials and methods

Design A qualitative study using in-depth interviews to explore women's perceptions of the outcome of surgery for urodynamic stress urinary incontinence.

Setting This work was embedded within a randomised-controlled trial designed to compare laparoscopic and open colposuspension for urodynamic stress urinary incontinence, funded by the Medical Research Council. The trial recruited 291 women from six centres. The women in this study were recruited from one centre.

Methods Ethical approval for the study was obtained from the hospital's Ethics Committee. Theoretical sampling was used to identify cases which were appropriate to the research question. The sample was purposively constructed to reflect the heterogeneity of the outcome. It was hypothesised that women who were 'cured' would have different perceptions about the outcome of their surgery in comparison to women who were not 'cured' An arbitrary definition of cure was constructed to identify women for the study. Objective cure was defined by the ICS 1-hour pad test, urinary loss <1g. Subjective cure was defined as those who were at least mostly satisfied with their urinary symptoms according to a question in the Bristol Female Lower Urinary Tract Symptom (BFLUTS) questionnaire. Twenty two women who had undergone colposuspension 2 to 4 years ago participated in in-depth semi-structured interviews.

Method of analysis Framework analysis was used to analyse the data in this study. (1). It is a qualitative method which helps to provide a degree of structure to the process of qualitative research analysis by demonstrating the filing and filtering process through which data have been sifted and analysed prior to the conclusions being drawn.

<u>Results</u>

The study captured a range of surgical outcomes, from those who felt it was successful to those who wished they had never undergone surgery. Women described not only the functional impact of urinary incontinence but also the impact that incontinence had on their sexual, emotional and psychological well-being.

Women who considered themselves "cured" of stress urinary incontinence were found to occasionally still experience urinary leakage. The feature which distinguished them from those not cured was they no longer needed to institute coping mechanisms to alleviate the impact of incontinence.

Three possible reasons were identified to account for discordant objective and subjective outcomes (i) the sensitivity of the pad test, (ii) complications of surgery and (iii) the influence of personality traits.

Interpretation of results

The main finding of this study was that women who were satisfied with the outcome of surgery continued to experience occasional urinary leakage. Epidemiological studies have found that a significant number of women experience a degree of incontinence but do not consider it to be a medical problem (2). Through the analysis of the in-depth qualitative interviews it was apparent that the reason the women in the current study were not distressed

by their continued urinary leakage was because it was not severe enough to require the reactivation of their coping strategies.

Concluding message

In conclusion the study has demonstrated that cure may not equate to absolute dryness. Cure was defined as the resolution of urinary leakage such that it no longer interferes with daily activities nor requires activation of coping strategies Symptoms appear to be poor predictors of satisfaction due the influence of personality, experience and coping mechanism. There is a need to develop a more individualised approach to the assessment of the outcome of surgery.

References

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