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# PREVALENCE OF BOWEL DYSFUNCTION SYMPTOMS IN WOMEN WITH URINARY INCONTINENCE

## Aims of Study

The aim of this study is to assess the prevalence of different bowel dysfunction symptoms; faecal incontinence, faecal urgency, constipation and faecal evacuation dysfunction, in women with urinary incontinence and to ascertain whether these women spontaneously seek medical advice regarding their bowel symptoms.

# Study design, materials and methods

A prospective study approved by the local ethical committee. All women referred with urinary incontinence for urodynamics investigation in a district general hospital between June 2002 & July 2003 were invited to participate in the study. Assessment included detailed history and pelvic examination; those who agreed to participate in the study were asked to complete the "Birmingham Bowel and Urinary Symptoms Questionnaire" (BBUSQ-22). Hospital notes were examined for patient demography and to ascertain the urodynamics diagnosis.

#### Results

Two-hundreds-and-eighty seven women with urinary incontinence participated in the study: 254 women correctly completed the questionnaires and the remaining 33 patients were excluded from the statistics. The mean age was 56 years (range 35-87); 87 patients (34.25%) were found to have urodynamic stress incontinence (USI), 74 patients (29.14%) had detrusor over activity (DO), 78 patients (30.7%) had mixed incontinence and 15 patients (5.9%) had normal urodynamic assessment. 148 patients (58.27%) had at least one bowel symptom (mean age 60 years). 80patients (31.5%) complained of faecal incontinence (FI), 68 patients (26.8%) complained of faecal evacuation dysfunction, 49 patients (19.3%) complained of constipation, 84 patients reported faecal Urgency with or without FI and 14 patients (5.5%) reported FI without prior warning. Only 106 Patients (41.73%) were free of any bowel complaint while 36 patients (14.2%) had all three complaints. In the group of patients with FI; 26 patients (32.5%) had DO, 32 patients (40%) had USI and 20 patients (25%) had mixed incontinence on urodynamics. In other words; 36.78% (32/87) of patients with USI suffered of FI, compared to 35.1% (26/74) patients in the DO group. Only 48 patients (18.9%) had any medical advice/treatment for their bowel symptoms, and they were more likely to seek medical advice if they have two or more bowel symptoms.

# Interpretation of Results:

To our knowledge this is the only study in the literature that assessed the prevalence of bowel dysfunction symptoms in women with UI. Previous studies emphasized only on faecal incontinence & were limited by the lack of urodynamic diagnosis for women or by being retrospective and hence subject to recall bias. This study has demonstrated the high prevalence of bowel dysfunction symptoms among women with UI, irrespective of its aetiology. It has also confirmed that they tend to be under-reported.

## Concluding message

We recommend that women should be directly approached regarding their bowel symptoms during their urogynaecological assessment. This could be done reliably, and without prolongation of clinic time, via a questionnaire to be completed prior to the consultation.