Azevedo G R 1 , Pasquini M B 2 , Vicentin T C 2 , Sampaio Neto L F 2 , Santos V L C G 3 1. Fundação Sao Paulo - PUC/SP e Escola de Enfermagem USP , 2. Fundação Sao Paulo - PUC/SP, 3. Escola de Enfermagem - USP

EVALUATION OF THE QUALITY OF LIFE OF WOMEN WITH STRESS URINARY INCONTINENCE USING KING'S COLLEGE HEALTH QUESTIONNAIRE AFTER PELVIC FLOOR MUSCLE EXERCISE.

Hypothesis / aims of study

SUI is a condition that creates changes in women's way of life, causing transformations that take them to social isolation, modifying and decreasing QOL. The aim of this study is to analyze the quality of life (QOL) of women with stress urinary incontinence (SUI) before and after therapy in a learning group with pelvic floor muscle exercises (PFME) using the King's College Health Questionnaire (KCHQ).

Study design, materials and methods

The KCHQ evaluates the impact of lower urinary tract symptoms on women's quality of life. It comprises 21 questions divided into eight domains such as: general health perception, incontinence impact, role limitations, physical and social limitations, personal relationships, emotions, sleep/energy. Furthermore, it has 2 independent scales, which are severity measures and urinary symptoms. High scores in KCHQ represent a worse quality of life. KCHQ has already been submitted to the process of translation and cultural adaptation into Portuguese and is now available for use in clinical research in Brazil and it is an instrument highly recommended by the International Continence Society for this type of evaluation. Fifteen employees of the Conjunto Hospitalar of Sorocaba, women with SUI after clinical evaluation, had been guided to answer the KCHQ before and after PFME. The PFME program based on that by Miller, Kasper, Sampselle (1994) involved a progressive 16-week program with group meetings held once a week; women were guided to complete 50 exercises every day, at home. The KCHQ reliability was calculated by means of internal consistency, using Standardized Cronbach's Alpha Coefficient and was based on the final scores from KCHQ filled out by patients before and after the PFME, at least, 16 weeks follow-up. The Wilcoxon Signed Ranks Test was used to compare the scores between follow-up and baseline (Confidence interval 95%) using the software *Statistical Package for the Social Sciences (SPSS)* for Windows 10.0.

Results

Tab. 1 – Internal Consistence Reliability's KCHQ. Brazil, 2005

	N	Standardized Cronbach's Alpha Coefficient
Scores	21	0,94
No unit scores		0,92
	7	
RL	2	0,98
PL	2	0,54
SL	2	0,88
PR	3	0,80
EM	3	0,85
SE	2	0,51
SM	5	0,73

Tab. 2 - Wilcoxon Signed Ranks Test KCHQ. Brazil, 2005

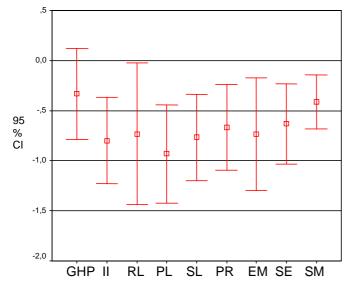
	Before	After	Z	Р
GHP11 - GHP10	2,33	2,00	-1,50	0,13
ll21 – ll20	2,87	2,07	-2,81	0,005
RL1 – RL0	2,63	1,90	-2,04	0,04
PL1 –PL0	2,60	1,66	-2,85	0,004
SL1 – SL0	2,00	1,23	-2,77	0,005
PR1 – PR0	1,60	0,93	-2,68	0,007
EM1 - EM0	2,40	1,66	-2,28	0,022
SE1 – SE0	2,56	1,93	-2,62	0,009
SM1 -SM0	2,54	2,13	-2,77	0,006

Tab. 3 - Descritible measures and estimated scores' KCHQ before and after Pelvic Floor Muscle Exercises (PFME). Brazil, 2005.

	Mean	SD	Median	IL 95%	SL 95%
Before PFME					
GHP	2,33	0,72	2,00	1,93	2,73
II	2,87	0,99	3,00	2,32	3,42
RL	2,63	1,07	3,00	2,03	3,22
PL	2,60	0,78	3,00	2,16	3,03
SL	2,00	0,92	2,00	1,48	2,51
PR	1,60	0,86	1,66	1,12	2,07
EM	2,40	1,00	2,33	1,84	2,95
SE	2,56	0,86	2,50	2,08	3,04
SM	2,54	0,71	2,60	2,14	2,94
After PFME					
GHP	2,00	0,65	2,00	1,64	2,36

II	2,07	0,70	2,00	1,68	2,46	
RL	1,90	0,76	2,00	1,47	2,32	
PL	1,66	0,48	1,50	1,39	1,93	
SL	1,23	0,32	1,00	1,05	1,41	
PR	0,93	0,31	1,00	0,75	1,10	
EM	1,66	0,70	1,66	1,27	2,05	
SE	1,93	0,45	2,00	1,67	2,18	
SM	2,13	0,59	2,20	1,80	2,46	

Fig. 1 - Confidence Interval KCHQ. Brazil, 2005



Interpretation of results

58.8% of the women were between 41 to 60 years old; 47.0% complained of SUI between 1 to 5 years, and 12.7% had previous treatments. Prior to PFME, there was compromise in almost all the KCHQ domains, affecting the QOL in the limitations of activities of the daily life, physical limitations, alterations in sleep and energy and use of protection to remain droughts. Following treatment, there was significant improvement in all the KCHQ domains, except in general health perceptions. The KCHQ's internal consistency reliability was .51 to .98.

Concluding message

This study presents to the brazilian health professionals the possibility to use KCHQ – translated to portuguese language – like a reliable and responsive instrument for measuring QOL and for measuring the PFME to improve urinary incontinence.

FUNDING: NONE DISCLOSURES: NONE

HUMAN SUBJECTS: This study was approved by the Comitê de Ética do Centro de Ciências Médicas e Biológicas da PUC/SP and followed the Declaration of Helsinki Informed consent was obtained from the patients.