

## CONSULTATION ABOUT VOIDING DISORDERS IN WOMEN'S CLINICS: QUESTIONNAIRE TO FEMALE DOCTORS PARTICIPATING IN NGO FOR GENDER-SPECIFIC MEDICINE

### Hypothesis / aims of study

As Japanese women commonly hesitate to consult male doctors about their voiding disorders such as urinary incontinence, women's clinics with female doctors, which have recently increased in number in Japan, are anticipated to provide guiding information regarding female urology. We made a questionnaire study on consultation about voiding disorders to female doctors participating in NGO for women's health.

### Study design, materials and methods

In September 2005, a self-description questionnaire was mailed to 734 female doctors who were members of NAHW (New Approach to Health and Welfare), a NGO concerned with gender-specific medicine and women's health, to determine their current practice on female voiding disorders.

### Results

Completed questionnaires were received from 147 of the 734 female doctors (response rate: 20.0%), most of them (121, 82.3%) were working in women's clinics accepting only female patients, and the rest were willing or interested to work in women's clinics. The rate of female patients who complained of voiding disorders in their clinics were 0% in 5 (3.4%), < 10% in 92 (62.6%), 10-30% in 44 (30.0%), and > 40% in 6 (4.1%). As many as 114 doctors (77.6%) had difficulty in managing female voiding disorders because of their lack of urological knowledge (96), the shortage of competent urologists to refer (52), and/or the patients' sense of shame (31). Regarding the urological knowledge, 20 (13.6%), 67 (45.6%), and 67 (45.6%) answered that they knew the contents of female incontinence guidelines (Japanese Urological Association), overactive bladder, and the TVT (tension-free vaginal tape) operation, respectively. Moreover, 65 (44.2%) answered that sanitary napkins were improper to manage urinary incontinence. Regarding the symptoms of overactive bladder syndrome (urgency, frequency and urge incontinence), 102 (69.4%) answered that they prescribed anticholinergic drugs. Regarding stress urinary incontinence, 85 (57.8%) answered that they advised the patients to do pelvic floor exercises, but only 9 (6.1%) did vaginal palpation to instruct pelvic floor exercises, and only 18 (12.2%) explained to patients the nature of operative options such as the TVT operation. Finally, 134 (91.2%) answered that they wanted to broaden their knowledge to manage female voiding disorders.

### Interpretation of results

Until recently, female urology and urogynecology were relatively neglected medical fields in Japan; e.g., only 9200 TVT operations were done before 2005 in the whole country. Our study showed that female doctors who are interested in women's health have opportunity to see patients with female voiding disorders in their outpatient clinics such as women's clinics, but they have difficulty to manage such complaints because of the lack of urological knowledge, the shortage of urologists to refer, and the patients' sense of shame. Although nearly 70% of them prescribe anticholinergic drugs for overactive bladder symptoms and 60% explain pelvic floor exercises for stress urinary incontinence, they seldom do vaginal palpation or explain surgical options. However, it seems encouraging that more than 90% of them want to broaden their knowledge to manage female voiding disorders.

### Concluding message

Education of both medical professionals and general public is mandatory to change the obstinate barrier of help-seeking behavior of incontinent women. Female doctors who are interested in women's health can be important targets for continence promotion, i.e., educational activities on overactive bladder, stress urinary incontinence, pelvic organ prolapse, and so on. Network and shared care between doctors involved in women's health and doctors with subspecialty of female urology or urogynecology must be pursued.

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