20551. Urinary incontinence in women who gave birth at least once, a descriptive study in a large African University hospital

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Introduction

- Urinary Incontinence> any involontary leakage of urine.
- it' s caused by dysfunction of the bladder smooth muscle(detrusor), urethral sphincter or anatomical abnormalities (congenital or acquired).
- Prevalence> 3, 5 million people in UK.
  Twice as common in female compared to male.
- DRC→ Descriptive study of UI? Types of UI?
  MUI? SUI? UUI?

Methods

Socio- demographic profile, urinary incontinence(UI) type and management has been determined in women who gave birth at least once.
-UI parameters, we used the Survey of urinary symptom profile **(USP)** developed by Association Française d' Urologie(AFU):
13 items (3 related SUI, 7 related to OAB and 3 related to dysuria).

Statistical analysis : The data were entered using the Epi info 10.0 software.
The data from descriptive analysis were summarized as frequency and percentage for qualitative data and mean for quantitative data. Stastitical calculations were done using the Epi info and SPSS software. The proportion calculation was made using the Chi square test.
Results were considered statistically significant if p< 0, 05

Results

A total of 131 womens were included in this study. The age of women varied between 20 to 72 years while the mean age was 41, 9 ± 10, 6 years ; 60 % of women were housewives ; 76, 3% of women were married.
Mixed Urinary incontinence was most prevalent (52, 5%).

Table II. Risk factors

Risks factors	No		YES		Total (131)	
	N	%	n	%	N	%
Tobaco	4	50	4	50	8	6,1
Highblood pressure	6	26	17	73,9	23	17,6
Diabetes	1	20	4	80	5	3,8
Chronic cough	1	25	3	75	4	3,1
Menopause	13	37	22	62,9	35	26,7
Twins birth	2	29	5	71,4	7	5,3
Cystectomy	4	40	6	60	10	7,6
Appendectomy	8	28	21	72,4	29	22,1
Myomectomy	0	0	2	100	2	1,5
Hysterectomy	0	0	1	100	1	0,8
Constipation	7	26	20	74,1	27	20,6
Uterine expression	14	30	32	69,6	46	35,1

Table III. Risks and contributing factors

Risks and contributing factors	Urinary incontinence						Chi-Square
	No UI		IU		Total		
	N	%	N	%	n	%	
ATCD leaks during pregnancy							
Leaks	13	18,8	56	81,2	69	100	
No leaks	38	61,3	24	38,7	62	100	p=0,000
Total	51	38,9	80	61,1	131	100	
Parity							
Primiparae	10	50	10	50	20	100	
Multiparous	41	36,9	70	63,1	111	100	p=0,270
Total	51	38,9	80	61,1	131	100	
Birth weight of the first childbirth(kg)							
2500	2	13,3	13	86	15	100	
2501 - 3999	44	44	56	56	100	100	
4000 et plus	5	31,2	11	68,8	16	100	p=0,60
Total	51	38,9	80	61,1	131	100	

Table IV. Knowledge about pelvic floor therapy by women

Perineal reeducation (N=131)	n	%
Knowledge about the perineal muscles		
Yes	16	12,2
No	115	87,8
Knowledge about massage and pelvic exercice		
Yes	3	2,3
No	128	97,7
Women who benefited from pelvic exercise		
Have benefited	0	0
Not having benefited	131	100

Conclusions

- There is a need to integrate the global management of UI in care of patients and fundamental research.
- A poor knowledge of women on the management of this entity requires an improvement of information, education and communication in this part of Africa.

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References

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