

FUNCTIONAL STATUS RELATED TO URINARY INCONTINENCE AMONG PATIENTS IN NURSING HOMES

Aims of study

The aims of this study were to map the set of problems associated with urinary incontinence (UI) among patients in nursing homes, and relate this to the patients' needs for help with toileting.

Study design, materials and methods

This survey comprised four general public nursing homes. A total of 98 patients, 74 women and 24 men, were included (response rate 81.7%). Average age was 86 years. A 24-hours bladder diary was used to get information about UI and bladder functioning. The anamnesis gave information about diagnoses, incontinence aids, medication and needs related to get to the bathroom.

Results

The prevalence of UI was 80.6% (79 patients). A total of 90 patients made use of incontinence aids. Urinary incontinence was not medically registered, but regarded as a caring concern. A total of 80 patients needed help with toileting. Table 1 gives an overview of functional status among patients with or without UI.

Table1. Functional status among patients with or without urinary incontinence, (n=97).

	Presence of urinary incontinence		Total (%)
	No (%)	Yes (%)	
No need of help	11 (57.9)	6 (7.7)	17 (17.5)
Need of toileting help at fixed times	5 (26.3)	23 (29.5)	28 (28.9)
Need to be reminded		5 (6.4)	5 (5.2)
Need help with everything	3 (15.8)	44 (56.4)	47 (48.5)

Interpretation of results

The prevalence of UI in our study (80.6%) was higher than shown in other studies in nursing homes. The high prevalence might be explained by the patients' high average age. Even though age does not cause UI, ageing is a risk factor. The patients in our study had several medical diagnoses (2.1 on average), and medication that might have had impact on the bladder functioning. Diversities in medical status of nursing home patients is therefore important to take into consideration in cross cultural comparisons. The high UI prevalence might also reflect the fact that patients in our study had a lower level of physical functioning than patients in other studies. Only 17 patients did not need toileting help, whilst 80 patients needed more or less help. Assisting patients to stay dry or caring for their UI, is a major concern for the staff. A comprehensive investigation of patients' level of physical functioning and their degree of need for help, are important when planning for UI treatment and care. No patient was given a medical UI diagnosis such as stress UI, urge UI or overflow UI. We got information about UI in the caring plan, which means that UI was treated as a caring concern and not as a medical condition. It seems that UI was passively accepted by the staff, and not approached with lower urinary tract rehabilitation such as pelvic floor training, biofeedback or behavioural modification. The fact that there were 11 continent patients that used incontinence pads, support this assumption. It is of great importance to increase the level of knowledge about problems associated with UI, in order to offer patients the best UI care.

Concluding message

UI is a common complaint that influences the daily living of patients in nursing homes. Adequate routines, knowledge and skilled practitioners are needed in order to achieve best practice. Differences in nursing home population across countries make it difficult to do cross cultural comparisons.

<i>Specify source of funding or grant</i>	The study was in part funded by the Norwegian Nurses Organisation
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	The Regional Committee for Health and Research Ethics in Mid-Norway
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes