

Abstract 673: Urinary- and fecal incontinence and physical activity levels after individualized interventions at a nurse-led pelvic cancer rehabilitation unit

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Objective: To investigate if an individually designed intervention at a nurse-led pelvic cancer rehabilitation unit, could improve incontinence of urine and feces as well as physical activity levels among pelvic cancer survivors.

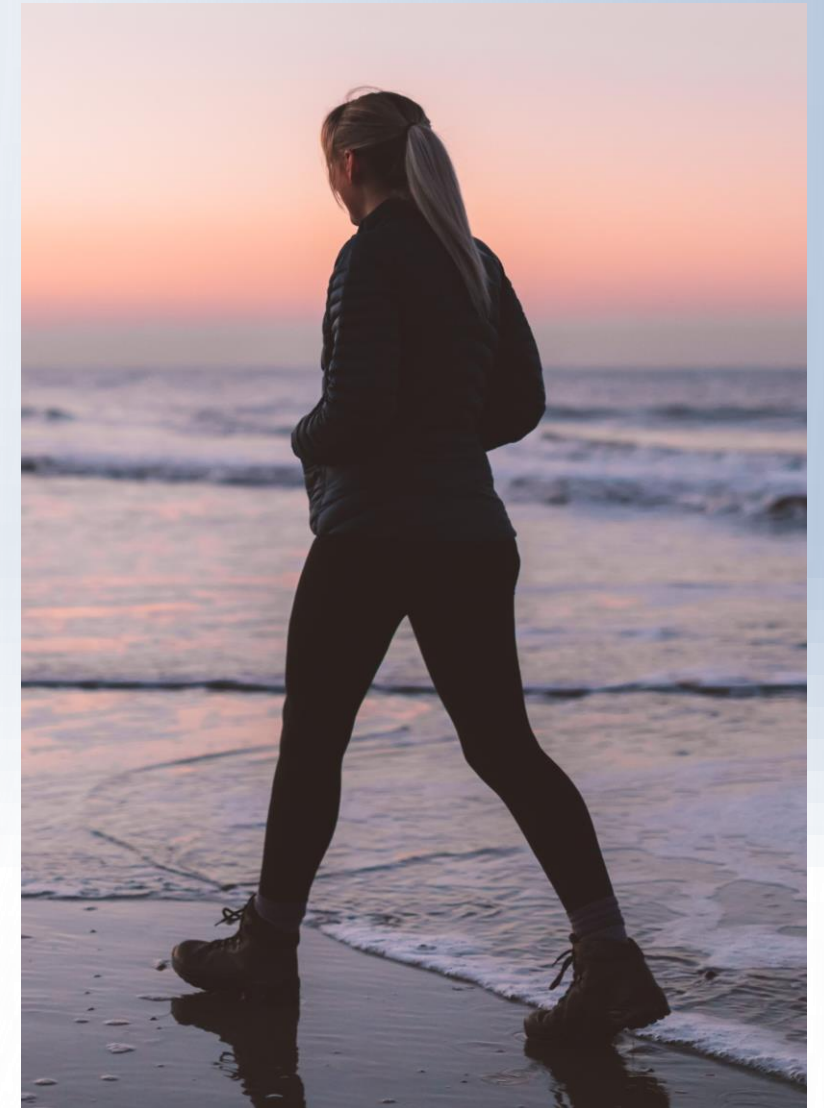
Methods:

At baseline, 6-48 months after pelvic radiotherapy, 266 female pelvic cancer survivors, mean age 64 years, answered a study-specific questionnaire before interventions were offered at a pelvic cancer rehabilitation unit.

The study-specific questionnaire included questions on sociodemographic- and clinical characteristics, questions regarding frequency of physical activity and questions on self-assessed incontinence of urine and feces.

Three months after the intervention the women answered a follow-up questionnaire with the same questions on fecal- and urinary incontinence and physical activity levels.

Level of fecal- and urinary incontinence and the level of physical activity at baseline and at three months follow-up was compared and evaluated by Wilcox signed rank test.



Results:

Three months after the individually designed intervention program the cancer survivors reported

- lower levels of fecal incontinence
- a clear tendency of lower levels of urinary incontinence

The cancer survivors reported

- no change in physical activity levels

Conclusions: Female cancer survivors reported reduced levels of fecal incontinence, a clear tendency of lowered levels of urinary incontinence but no increase in physical activity levels.

Our results indicate that additional rehabilitation measures are needed to increase female pelvic cancer survivor's physical activity levels.

Possibly complementary physiotherapeutic rehabilitation in the form of physiotherapy-led pelvic floor muscle training, could contribute to further decrease in incontinence levels and increased physical activity level among female pelvic cancer survivors.

However, radiotherapy and surgery in cancer treatment may induce damage to pelvic floor tissue such as muscles and nerves. Therefore, the effect of pelvic floor muscles training on incontinence among female pelvic cancer survivors need to be studied before pelvic floor muscle training can be implemented as a routine in existing pelvic cancer rehabilitation.