Introduction
Pelvic Floor Muscle Exercise (PFME) which is recommended as first line conservative treatment for women with Urinary incontinence. A survey about adherence to PFME along women with urinary incontinence who have received PFME training from Nurse at Continence Clinic Princess Margaret Hospital from 16 to 29 September was conducted. The results found that 82.6% of women in our sample had ever performed PFMT. However, only 26.1% performing PFME met the recommended regimen. The survey findings indicate that the PFME training program to improve adherence to PFMT is necessary.

Objectives
To enhance adherence to PFME among women with urinary incontinence so as to reduce the symptoms severity and increase quality of life.

Methodology
Methods: A randomized controlled trial included women with urinary incontinence and plus pelvic floor muscle exercise training as their conservative treatment. Women were randomized to receive the usual intervention which entailed training to pelvic floor exercises, or new intervention which entailed training in pelvic floor exercise and incorporated strategies to improve adherence. Women completed UDI-6 and IIQ-7 questionnaires before and after the intervention. Frequency of performing pelvic floor exercise was self-reported. Setting: Continence Nurse Clinic at Princess Margaret Hospital, Hong Kong. Participants: Women aged over 18, able to read and write Chinese, diagnosed with urinary incontinence and were referred by urologist, gynecologists or other specialists were recruited. Women who previously participated in pelvic floor muscle exercise training program, presently use of continence pessary,
medication for urinary incontinence or electro-stimulation therapy, and urinary tract infection were excluded. Interventions: All women recruited for this study were asked to practice pelvic floor muscle exercise at home after a pelvic floor muscle training session. In the study group, pelvic floor muscle exercise diary and phone interviews were incorporated to enhance adherence.

**Result**
40 women were recruited, 20 in control group (usual intervention) and 20 in study group (new intervention). Baseline demographic and urologic characteristics were similar in both groups. New intervention could enhance adherence to PFME in 30% from usual intervention and result was close to statistical significant ($p = 0.056$). Both interventions had led to significant improvement in urinary symptoms severity and quality of life after 12 weeks. Also, the study found that improvement of UI symptom severity was associated with adherence to PFME ($p = 0.042$), whereas not the improvement in quality of life ($p = 0.18$). Comparing 2 interventions, the different in the mean changed in total score of UDI-6 and IIQ-7 were not significant ($p = 0.53$ and 0.369 respectively). Therefore, which intervention was more effective in improving urinary incontinence symptom severity and quality of life could not be defined in this study.