



Service Priorities and Programmes
Electronic Presentations

Convention ID: 127

Submitting author: Ms Yuen Ching KAM

Post title: Advanced Practice Nurse, Queen Elizabeth Hospital, KCC

Efficacy and health related quality of life improvement by pelvic floor muscle exercise in female patients with stress urinary incontinence

Kam YC(1), To HC (1), Sze SC (1)

(1) Urology Nurse Clinic, Department of Surgery, Queen Elizabeth Hospital, KCC

Keywords:

pelvic floor muscle exercise

health related quality of life improvement

stress urinary incontinence

Efficacy of pelvic floor muscle exercise

Introduction

Pelvic floor muscle training (PFMT) is a first-line conservative treatment for stress urinary incontinence in women. Stress urinary incontinence impacts on various aspects of a woman's life and also a significant reduction in their quality of life. The Urology Specialty nurse at the Urology Nurse Clinic are providing nursing care for continence care on day to day basis, therefore it is important to evaluate the efficacy and health related quality of life improvement by pelvic floor muscle exercise in female patients with stress urinary incontinence.

Objectives

This study aimed to evaluate the efficacy and improvement of health related quality of life (HRQOL) for female patients with stress urinary incontinence (SUI) after pelvic floor muscle exercise (PFME) training under urology nurses' supervision.

Methodology

All female patients who were referred to the urology nurse clinic in Queen Elizabeth Hospital from April 2011 to July 2012 for SUI were included for analysis. Those who had overactive bladder only were excluded. The patients were taught PFME at the first visit and were followed up at 1st, 3rd, 6th, 9th and 12th month. At each visit, detailed history taking, one-hour pad test, UDI-6, IIQ-7 and OAB-V8 questionnaires were performed. The data were prospectively collected.

Result

86 patients were included for analysis with the mean age 58.9 years old. There were 59.9% patients who had urinary incontinence for more than 2 years and 41.2% patients had worsening of incontinence over the 6 months before the first visit. Before the training, they had leakage of 9.3gm urine in 1-hour pad test and had mean pad use of 1.3 pads/ day. The pad use before the training had been underestimated their severity as 72.1%, as patients did not use or taught to use light pads for protection. The 1-hour pad test results is associated with worse HRQOL in travel (p=0.018) and social / relationships (p=0.016). There were significant improvements in 1-hour pad

test (mean =5.6gm, p=0.025), UDI-6 total score (p=0.000), IIQ-7 total score (p=0.000) at the 3rd month visit and further improvements were noted at 12th month visit. Overall, the patients perceived 74.3% improvement at 12th month follow up. Conclusion: SUI caused bothersome to patients by urinary incontinence and adversely affecting their HRQOL. PFME under urology nurses' supervision, as a non-invasive mean of treatment, provided significant improvement in their continence and quality of life.