

THE PREVALENCE OF URINARY INCONTINENCE IN HOSPITALS: A STARTING POINT FOR A NEW POLICY?

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OBJECTIVES

Evaluation of the prevalence of urinary incontinence in the Belgian hospitals and determination of the need for a new policy for urinary incontinence.

METHOD

We used a multisite cross- sectional descriptive design. We composed the sample by consecutive sampling. We drew up the questionnaire out of two validated questionnaires (ICIQ- SF and IIQ 7) and we completed them with specific questions relevant for this issue. We distributed the questionnaires in two different hospitals: UZ Gent and GZA Sint Augustinus. In both hospitals we visited surgical as well as medical wards.

Tables

Frequency	%
Once a week or less:	35,3
Multiple times a week:	25,2
2-3 times a week:	15,1
Once a day:	18,7

Quantity	%
A few drops:	75,5
A small amount:	18,7
A big amount:	3,6

QOL	%
Good:	48,9
Average:	22,3
Bad:	15,8
Very bad:	12,2



RESULTS

Results showed that of the 439 participants, 31.7% appeared to be incontinent. 71.2% of them were women and 28.8% men. Ages varied between 21 and 97 with an average of 68.7. 36% of the participants was hospitalised because of a surgery, 28.8% needed to be examined and 34.5% constitutes there for a reason other than those mentioned in the questionnaire. We found that the majority of the participants (35.3%) lost urine once a week or less. 75.5% suffered from a minimum of urine loss and 48.9% mentioned a good quality of life. 42.2% of those who were incontinent had searched for help. Of those who got help, we found the treatment to be effective in only 13.8% of the cases. The majority of the participants (54.7%) mentioned to have no expectations about the possible solutions for urinary incontinence. 58.2% of the participants did not wish to receive information from a continence nurse during their stay in the hospital.

CONCLUSIONS

We believe that there is a need for a new policy concerning urinary incontinence. People should be better informed about possible solutions and the effectiveness of the treatment should be improved, as well as better evaluated. Whether a hospitalisation period is a good opportunity to start evaluating the incontinence remains open for discussion.

References:

1. Aslan, E., Beji, N.K., Erkan, H.A., Yalcin, O., and Gungor, F., (2009). The prevalence of and the related factors for urinary and fecal incontinence among older residing in nursing homes, *Journal of clinical nursing*, 18, 3290-3298.
2. Onur, R., Deveci, E.S., Rahman, S., Sevindik, F., and Acik, Y., (2009). Prevalence and risk factors of female urinary incontinence in eastern Turkey, *International journal of urology*, 16, 566-569.
3. Stoddart, H., Donovan, J., Withley, E., Sharp, D., and Harvey, I., (2001) Urinary incontinence in older people in the community: a neglect problem?, *British journal of general practice*, 51, 548-554.