FACTORS INFLUENCING URINARY INCONTINENCE IN ELDERLY AND ITS IMPACT ON QUALITY OF LIFE

ABSTRACT

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AIMS & OBJECTIVES

- To evaluate the factors influencing urinary incontinence
- To evaluate the impact of urinary incontinence on the quality of life

METHODOLOGY

Study Centre: Geriatric Medicine OPD, Rajiv Gandhi Government General Hospital, Chennai.

Study Duration: 6 months

Study Design: Cross sectional and observational study

Sample size: 500 patients

Inclusion criteria

Patients above 65 years of age and willing to participate in the study.

Exclusion criteria

Patients not willing for study
Patients with severe cognitive impairment

Procedure

Patients were selected as per above said inclusion & exclusion criteria. Detailed history with comorbiare elicited by questionnaire. Clinical examination, Mental status examination, routine urine analysis, urine culture, blood sugar, ultrasound abdomen and pelvis were performed. Revised urinary incontinence scale (selected from Urogenital Distress Inventory, Incontinence severity index) to assess the severity of symptoms, International Prostate System Score, King’s Health questionnaire, Geriatric depression scale to assess the quality of life were used.
RESULTS:

Prevalence of urinary incontinence was found to be 16.4%. The prevalence rate was 11.2% among men and 21.6% among women. It was found that urinary incontinence increased with age in both sexes. 53 patients above 75 years of age had urinary incontinence and this association was found to be statistically significant with p value 0.0009. Among 52 patients who had education upto primary school, 40 patients sought medical treatment only after 2 years of symptoms. Urinary incontinence was found to be significantly associated with factors like female sex, diabetes mellitus, chronic respiratory disease, stroke, heart disease, arthritis, Parkinson’s disease, gastrointestinal disorders, cystitis, uterine prolapse, prostate enlargement with p value less than 0.005. Percentage of urge, stress, mixed incontinence among male and female were 57.1%, 14.2%, 28.5 and 29.6%, 48.1%, 23% respectively. Among males and females, severity of the condition was mild in 39.2% and 44.4%, moderate in 25% and 24%, severe in 35.7% and 31.4% respectively. Male patients had poor quality of life with urinary incontinence with p <0.00001. In females, urinary incontinence was significantly associated with poor general health perception, daily activity limitation, social limitation, physical limitation, personal limitation and emotional problems with p value <0.05. Incontinent patients significantly suffered from depression, the p value being 0.005.

CONCLUSION:

Urinary incontinence was common among community dwelling elderly. Stress incontinence was found to be common among females and urge incontinence among males. Demographic factors and co-morbid medical conditions were associated with urinary incontinence. It was found that quality of life was strongly affected with more depressive symptoms in incontinent patients with severe incontinence.

KEYWORDS:

Stress Urinary Incontinence, Urge Urinary Incontinence, Quality of Life, Depression.