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Assess the urinary incontinence its risk factors and quality of life among women above 50 years residing in Eraiymangalam village

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ABSTRACT

Urinary incontinence is a distressing and disabling condition causing significant morbidity, affecting the social, psychological, occupational, domestic, physical, and sexual lives of 15% to 30% of women of all ages. The inability to control urine is quite and unpleasant and distressing problem. Although it does not lead to death, it causes substantial morbidity, social seclusion, and psychological stress resulting in impaired Quality of life. Many women are too embarrassed to talk about it and some believe it to be untreatable. Urinary incontinence is estimated to affect 200 million people worldwide and it will likely to affect over 423 million people by 2018. The prevalence of Urinary incontinence increases with age. Moderate to severe urinary incontinence affects 7% of women 20-39 years of age, 17% 40-59 years of age, 23% 60-79 years of age, and 32% > 80 years of age. This number may be an underestimate because majority of women fail to report Urinary incontinence to their health care providers. So the present study is to assess the urinary incontinence, its risk factor and quality of life among women above 50 years residing in Eraiymangalam village.

Methods

Quantitative approach cross sectional design was adopted to conduct this study. 50 women were selected with purposive sampling technique. The inclusion criteria are women above 50 years of age groups. Willing to participate in the study. Available during the time of data collection. The data was collected using the tools consist of three parts demographic variable, risk factors questionnaire and quality of life experience questionnaire.

Result

Out of 50 sample the urinary incontinence affects the quality of life moderately by 58%, mildly by 24% and severely by 18% of the population.

Conclusion

The study was undertaken to assess the urinary incontinence, its risk factors and quality of life among women above 50 years residing in Eraiymangalam village. 50 samples were selected by following inclusion and exclusion criteria. The study involved cross sectional design in which purposive sampling technique was used. The results were described by using descriptive and inferential statistics. Results proved that urinary incontinence is affecting the quality of life of 58% moderately, 24% mildly and 18% severely. And there was a significant association was present between the socio demographic data and the quality of life.

Keywords: Urinary incontinence, Risk factors, Quality of life, Women, Residing.

INTRODUCTION

Urinary incontinence is a common but often under reported medical condition laid significant impact in ones quality of life. The international continence society defined Urinary incontinence as “the complaint of any involuntary leakage of urine and which is a social or hygienic problem”. Potential risk factors for Urinary incontinence include increasing age, parity, vaginal delivery, obesity, surgery, constipation and chronic respiratory problems such as a cough. The inability to control urine is quite and unpleasant and distressing problem. Although it does not lead to death, it causes substantial morbidity, social seclusion, and psychological stress resulting in impaired Quality of life. Many women are too embarrassed to talk about it and some believe it to be untreatable.

Urinary incontinence is common in women, but is under reported and under treated. Despite the great work of awareness of urinary incontinence (UI) by the World health organisation (WHO), popular belief is still an essential problem to providing care to the numerous women suffering of urinary incontinence. Urinary incontinence is more prevalent than most chronic disease yet largely under reported. In a study conducted in sub- Sahara region, 77% of patients with Urinary incontinence would not seek medical care, same results were found in another study in Taiwan where only an average of 29% of women seeking medical advice on Urinary incontinence. In Majorca (Spain), 1 women out of 4 suffers from Urinary incontinence and would seek medical care when quality of life has decreased, highlighting the severity of the condition. Kinchen et al. had come to the same conclusion earlier in their study, which is the sad reflection of Urinary incontinence reality. Many women suffer in silence, believing that it is a normal aging process, however research reported countless situation related to leak of urine.

Urinary incontinence is estimated to affect 200 million people worldwide and it will likely to affect over 423 million people by 2018. The prevalence of Urinary incontinence increases with age. Moderate to severe Urinary incontinence affects 7% of women 20-39 years of age, 17% 40-59 years of age, 23% 60-79 years of age, and 32% > 80 years of age. This number may be an underestimate because majority of women fail to report Urinary incontinence to their health care providers.

Thilagavathy ganapathy et al (2018) conducted a study on impact of urinary incontinence on quality of life among rural women in rural primary health centre at Gottigere, Bangalore. It is a cross sectional study about 611 women were participated in the study, the samples were selected by purposive sampling method. The tool used is health related quality of life, kings quality of life health questionnaire was used. The findings suggest that prevalence of urinary incontinence was (23.08%) with majority presenting stress (54.61%) followed by urgent (27.66%) and mixed (17.73%) incontinence. The overall HRQOL in role limitations, daily activities, general health, physical/social well being, sleep/energy, emotions and personal relationships domains was poor with insignificant difference among stress versus urgency versus mixed incontinence ($p=0.641$)

Research reveals that one in ten women in India lead a poor Quality of life with Urinary incontinence, limiting their holistic functioning in daily activities of normal life. In general, women report that Urinary incontinence has a greater impact on physical, social and sexual activities, economic burden and self perception. Nevertheless, comorbidity associated with urinary incontinence such as fungal infections, perineal dermatitis, skin irritation, sores and rashes by wet skin involves several negative consequences in Quality of life of women. Frequently, nocturia, urgency and urge incontinence have also been shown to increase the risk of falls, which may lead to fractures and other morbidities. Furthermore, the significant association of symptoms of urinary incontinence with anxiety, fear and depression alters the Quality of life and general functioning of the women. A population based study reported that majority (80%) of women with urinary incontinence presented with depression and panic disorders.

MATERIALS AND METHODS

A sample of 50 women above 50 years of age groups. Samples are selected by purposive sampling techniques. Quantitative approach cross sectional design was adopted to conduct this study. The study was conducted during a one week period. Data collection was done in the eraiyamangalam village, after getting permission from the village panchayat. Demographic variable consist of age, type of family, occupation, educational level, age at

marriage, BMI, parity and socio economic status. The risk factor questionnaire consist of any history of diabetes mellitus, hypertension, tobacco chewing, passive smoking, tea/coffee intake, chronic cough, constipation, faecal incontinence, gynaecological surgeries, abortion, prolonged labour, normal vaginal delivery, LSCS, lower urinary tract infection. The quality of life experience questionnaire consist of role limitations, physical/social limitation, personal relationship, emotions, sleep/energy

The study investigator explained to the participants about the study objectives, and requirement of consent to participate in the study. The investigator then provided instructions to the

participants to fill the demographic data, risk factors and how the urinary incontinence affecting their quality of life. Chi square test was used to test the association between the categorical variables. $P < 0.05$ was taken as statistically significant.

RESULTS

Results shows that urinary incontinence is affecting the quality of life of 58% moderately, 24% mildly and 18% severely. And there was a significant association was present between the socio demographic data and the quality of life. Frequency and percentage distribution of risk factors associated with urinary incontinence

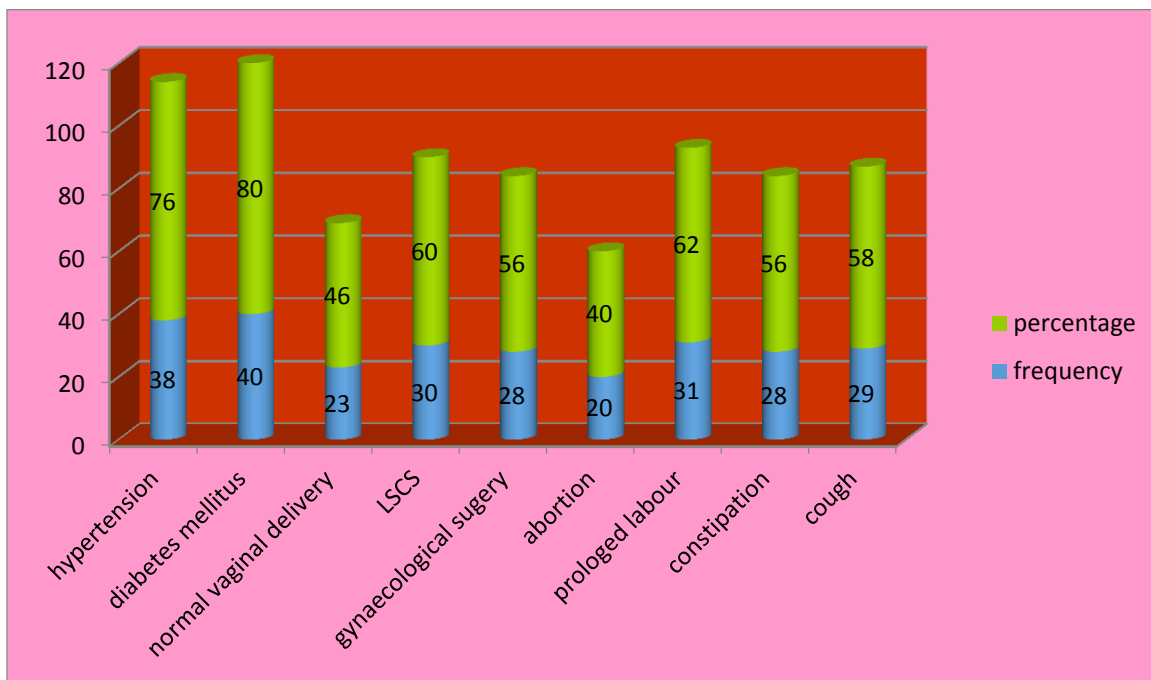


Figure-1: Risk factors associated with urinary incontinence

The above table shows the frequency and percentage of risk factors. In hypertension the frequency is 38 (76%), diabetes mellitus 40 (80%), normal vaginal delivery 23 (46%), LSCS 30 (60%),

gynaecological surgery 28 (56%), abortion 20 (40%), prolonged labour 31 (62%), constipation 28 (56%), cough 29 (58%).

Frequency and percentage distribution of quality of life among women associated with urinary incontinence

S.no	Quality of life	Frequency	Percentage
1	Role limitation	16	32%
2	Physical/social limitation	14	28%
3	Personal	2	4%
4	Emotions	6	12%
5	Sleep/energy	8	16%
6	Symptom severity	4	8%

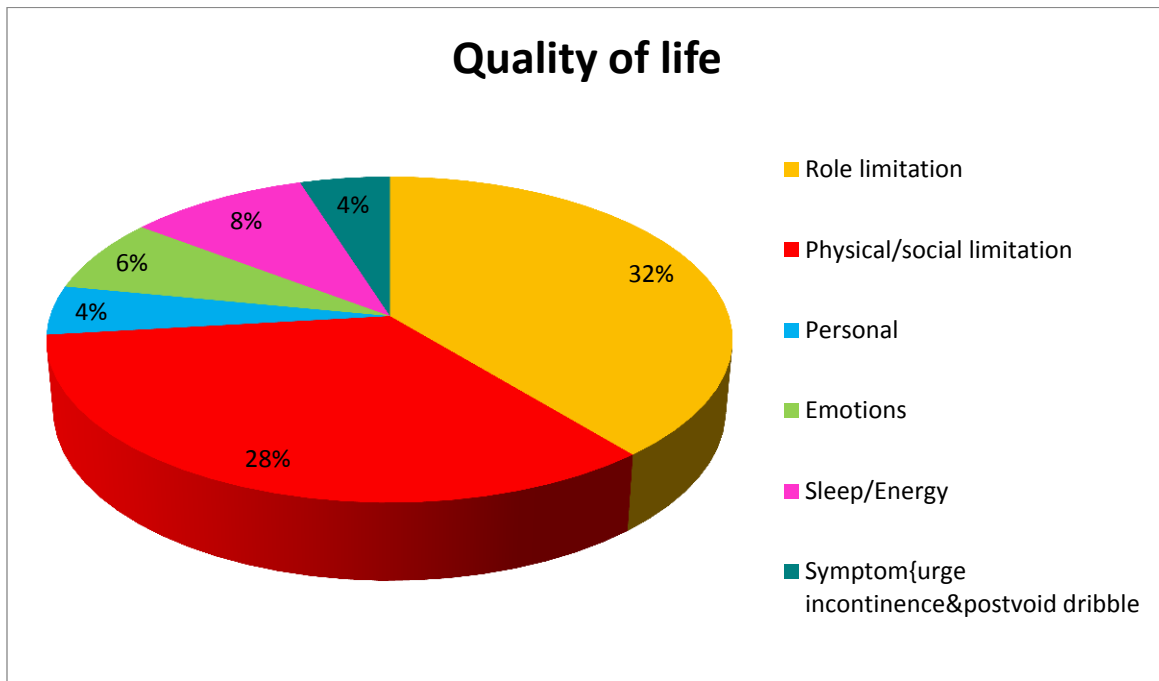


Figure-2

Figure-3 reveals the quality of life affected by urinary incontinence. About 32% women role gets limited due to urinary incontinence, 28% women physical/social activities limited due to urinary incontinence, 4% affected by personally, 6% affected by emotionally, 8% had affected sleep/energy, 4% affected by urge incontinence & post void dribble.

To associate the quality of life of women having urinary incontinence with selected demographic variables.

This reveals that the chi square is significant or not significant to the demographic variables. Here the age, type of family, occupation, body mass index, parity in the demographic variable are significant. Whereas the education level, age at marriage, socio economic class are not significant. The χ^2 values of quality of life among women having urinary incontinence with selected demographic variables shows statistically significant that there is a association between the quality of life and the selected demographic variables such as age, type of family, occupation, body mass index, parity.

DISCUSSION

The present study assess the urinary incontinence, its risk factors and quality of life among women above 50 years residing in

Eraiymangalam village. The study reveals that the urinary incontinence affects the quality of life moderately by 58%, mildly by 24% and severely by 18% of the population.

A similar study was conducted among rural women in rural primary health centre at Gottigere, Bangalore. It is a cross sectional study about 611 women were participated in the study, the samples were selected by purposive sampling method. The tool used is health related quality of life, kings quality of life health questionnaire was used. The findings suggest that prevalence of urinary incontinence was (23.08%) with majority presenting stress (54.61%) followed by urgent (27.66%) and mixed (17.73%) incontinence. The overall HRQOL in role limitations, daily activities, general health, physical/social well being, sleep/energy, emotions and personal relationships domains was poor with insignificant difference among stress versus urgency versus mixed incontinence ($p=0.641$)

Another similar study conducted among middle age women in bareilly. It is a quantitative study. About 464 women were selected. The tool used is demographic data structured questionnaire, kings health quality of life assessment scale. The findings suggest that out of 464, 28 women had urinary incontinence. The overall prevalence of urinary incontinence in our study was about 12%. There

was a significant association of increasing age and presence of urinary incontinence.

In the present study the χ^2 values of quality of life among women having urinary incontinence with selected demographic variables shows statistically significant that there is a association between the quality of life and the selected demographic variables such as age, type of family, occupation, body mass index, parity.

The study concluded that majority of 58% are moderately affected by the urinary incontinence.

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