

SUCCESSFUL PREVENTIVE EDUCATION OF LOWER URINARY TRACT DYSFUNCTION AND PROMOTION OF INDEPENDENCE IN TOILETING SKILLS FOR ELDERLY CITIZENS, A COOPERATIVE ACTIVITY WITH UROLOGISTS, PHYSIOTHERAPISTS, OCCUPATIONAL THERAPISTS, NURSING STAFFS, CARE STAFFS, NON-PROFIT ORGANIZATION STAFFS ADMINISTERED BY LOCAL CITY GOVERNMENT

Hypothesis / aims of study

In aging society, it is important for citizens and communities to keep citizens' healthy life expectancy, not deteriorating into frail status. For healthy aged life, we hypothesized that independence in urinary tract function and toileting skills are important. Thus, we examined the need for prevention, intervention and treatment of urinary tract dysfunction (LUTD) and explore the comprehensive interventions to citizens.

Study design, materials and methods

The questionnaires asking LUTD and need for prevention, intervention and treatment to daily independent 1,000 citizens without dementia over 65 years old were filled out anonymously, administered by local city government.

Results

637 citizens (Average age, 74 years old) answered the questionnaires. 59% of them need LUTD care products such as pads or diapers. Annoyances related LUTD reported by citizens were decrease in going out and fear of dementia progression. Practical problems related LUTD were financial burden of care products cost and labours to bring used pads or diapers to garbage collection area. Citizens favoured to manage these annoyances and problems by themselves, not consulting to urologist, general practitioner, nursing or care staffs, even not to their own family members. Citizens favoured anonymous telephone consulting services by the LUTD consultants rather than medical practitioners.

Using this result as reference, local government started interventions to citizens in cooperation with urologists, physiotherapists, occupational therapists, nursing staffs, care staffs, non-profit organization staffs such as preventive education programs toured around local citizen-centers, 3-months preventive exercise programs for continence and independence for toileting skills, free telephone or visiting consultation services by professional LUTD consultant.

95% of citizens (male, female, 5; 95, average age 79 years old) at educative programs at citizen-centers attended for their own future prevention. 80% of participants in exercise programs realized decrease or elimination of incontinence, 50% of them keep exercise even after programs (average follow up year; 3.5). The participants in exercise program did not deteriorate ADL in 3.5 years. More than 30 consultations per a month are accepted at telephone service, asking how to choose the care products and when to visit doctors.

Interpretation of results

Citizens having LUTD favoured self-care and management and anonymous telephone consultation rather than seeking pharmacological treatment at clinics or hospitals. Preventive educational programs administered by local government offered helped citizens to develop self-care. Anonymous consulting service offered better choice of care products and better opportunity to visit doctors.

Concluding message

Interventions for preventive education of LUTD and promotion of independence in ADL for elderly citizens, a cooperative activity with multiple medical, nursing, care, and rehabilitative staffs, administered by local city government, are successful.

References

1. Rejuvenation Res 2013; 16:206
2. Eur Rev med Pharmacol Sci 2016; 20: 447
3. J Gerontol Nurs 2016; 42: 16

Disclosures

Funding: none **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Kitakyushu City Council University of Occupational and Environmental Health, Japan **Helsinki:** Yes **Informed Consent:** Yes