

LOWER URINARY TRACT SYMPTOMS AND QUALITY OF LIFE OF WOMEN IN THE NURSING STAFF OF A PREHOSPITAL CARE SERVICE

Hypothesis / aims of study:

Studies show the interference of urinary incontinence (UI) in the occupational activities of working women [1] and nursing professionals [2]. The prehospital care service demands greater attention and concentration since it involves urgency and emergency situations. Thus this study's objectives were identifying the prevalence and the types of UI on the women of a nursing team that works in a prehospital care service and evaluate the impact of UI on health-related quality of life (HRQL).

Study design, materials and methods

This is a cross-sectional study. Computer-based questionnaires were applied to evaluate the HRQL: International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF) and King's Health Questionnaire (KHQ). These computer-based questionnaires are part of a software module, developed by this study's researchers, that assists the diagnostic of lower urinary tract dysfunctions decision making process.

The questionnaire's scores are presented by the software immediately after they are completed, and after that are exported to an Excel® spreadsheet for analysis. Descriptive statistics with the presentation of absolute, relative and median frequencies were applied to evaluate HRQL and the impact of UI. The value $p < 0,05$ was adopted as the significance level for all the tests and the Statistical Package for the Social Sciences (SPSS) software was used to analyze the data.

Results

HRQL, KHQ and ICIQ-SF evaluation questionnaires were applied to all the women that are part of the prehospital care service nursing team. At the time the data was collected, none of them were on vacation or work leave. Therefore, the sample was comprised of 30 women.

Ages varied from 27 to 48 years, with an average of 39 years. Eight (26.7%) of them were nurses and the other 22 (73.3%) were nursing technicians.

Among the women, 11 (36.7%) affirmed they had UI. Most of them, eight (72.7%) had mixed UI. Besides, five (45.5%) women that had reported stress or mixed UI, also had episodes of coital UI. Four (36.3%) reported having UI episodes various times during the day.

When the ICIQ-SF was applied, the evaluated HRQL had an average score of 8.8 and (Q1-Q3 = 6.5-10.5). The KHQ domains with the biggest average punctuations were Severity Measurement (49.4), Incontinence Impact (47.2) and Sleep and Readiness (40.3).

Interpretation of results

This study's results showed that mixed urinary incontinence (MUI) was the most frequent among the women, considering the types of UI (72.7%). Although most of them (ten or 90.9%) had said they considered the quantity of urinary loss as being small, the impact on HRQL, evaluated by the ICIQ-SF scale, that varies from zero (interferes the least) to ten (interferes the most), was at least moderate, since seven women (63.6%) said that the UI interference on daily life was equal to or greater than four.

Please note that the evaluation that the professional does about her own health and Quality of Life (QoL) may interfere on the perception of the work environment stressors and on the coping mechanisms used to deal with them [3], influencing her satisfaction with work. This is an aspect that should be better investigated in future studies.

This study's women are part of a prehospital care service nursing team and, therefore, perform activities that require physical effort. This characteristic seems to have an influence on the loss episodes, since ten (90.9%) women reported urinary loss during physical activities.

Systematized and integrated physical activity, including pelvic floor muscle exercises, could contribute to UI improvement and should be oriented to all women, for prevention and treatment.

It is appropriate to comment that the samples' size and the lack of previous data about the UI risk factors and other Lower urinary tract symptoms (LUTS) were some of this study's limitations. However, the results show important premises for the conduction of new studies about this theme and how UI can interfere in these women's work activities.

Concluding message

The prevalence of LUTS in this group of women was 36.7%, and the most common type was mixed UI. The Sleep and Readiness domain suffered the biggest impact when a woman had LUTS.

References

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Disclosures

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