

**28 - THE PREVALENCE AND IMPACT CAUSED BY URINARY INCONTINENCE IN HEALTH WOMAN**

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**INTRODUCTION**

Urinary Incontinence (UI) is defined as the involuntary loss of urine through the urethra. There are many factors associated with this disease especially: the intrinsic urethral sphincter deficiency, increased intra-abdominal pressure, pregnancy, high number of births, obstetric trauma, obesity, smoking, chronic neurological and respiratory diseases, surgical procedures, use of allergy medications and lifestyle. There are also some anatomical changes that may cause the UI, such as hypermobility of the urethra, the sphincter deficiency and modifications of the pelvic floor as sprains and muscle fibers in the urethra, and also detrusor instability (PETER et al., 2011).

The pelvic floor muscles, along with the endopelvic fascia, play a fundamental role in supporting the pelvic organs and the maintenance of urinary continence (Ribeiro and ROSSI, 2000). Currently, the term pelvic floor the whole set of structures that supports the abdominal and pelvic viscera (Sampaio, FAVORITE, RODRIGUES, 1999). The pelvic floor consists of coccygeus muscles and the levator ani, which are collectively called the pelvic diaphragm, which is crossed in front of the vagina and the urethra and anal canal at the center (FREITAS; MENKE; RIVOIRE, 2002).

The pelvic floor is seen superiorly to the pubic symphysis and the sacrum in the anterior and posterior apex and the ischial spines and lateral ligamentous support anchors. It uses a line drawn between the ischial spines to split the pelvic floor into anterior and posterior segments (WEI et al., 1999).

In the process of continence there are several factors that must be connected correctly to generate an appropriate response thus: adequate transmission of abdominal pressure to the urethra, anatomical and functional integrity of the urethra, the integrity of the supporting structures of the bladder neck and pelvic floor along with the need at times of rest or intra-abdominal pressure. But for all this to happen it is necessary that the bladder neck and proximal urethra are in perfect transmission zone which will depend on the integrity of support structures and activities of the pelvic floor (PALM; HERMANN; Dambros, 2009) muscles.

About 50% of women have urinary incontinence and discomfort and discomfort caused by the situation end up moving away from society not to go through constraints. Another factor that ends up happening to prevent the disease is to decrease fluid intake as prevention, which ultimately hurts the health with the presence of urinary tract infection and kidney damage (PETER et al., 2011).

The UI is a health problem that affects millions of individuals worldwide, is more common in women. Thus, it is characterized as a factor that may affect the physical and mental health of the individual, causing decreased their confidence and affecting their quality of life (Tavares et al., 2011).

Thus, this research aims to analyze the prevalence of urinary incontinence in women, verify the factors related to urinary incontinence and the impact on health of incontinent women.

**MATERIALS AND METHODS**

It is a cross-sectional quantitative study. The field research was conducted in the city of Three Bars of Paraná (PR) with forty-six women aged 25 to 80 members of the Mothers' Friendship Club.

Among the inclusion criteria were women aged at least twenty five years and a maximum of eighty. Once filled these criteria, respondents were instructed on their participation and involvement in the research, which through a signature on a consent form and informed consent for the realization of the same. Women who refused to carry out research or refused to sign the term of free and informed consent were excluded from the study. The necessary information was kept confidential and is not divulged any personal data of survey participants. All data have been attached in a Microsoft Excel 2010 spreadsheet.

Data collection was done through interviews using a questionnaire that sought information relating to personal identification. Then the International Consultation on Incontinence instrument Questionnaire-Short Form (ICIQ-SF) "was applied. This questionnaire evaluates the quality of life of patients with urinary incontinence and contains information regarding the frequency of urinary leakage and the amount of urine that is lost throughout the day, how to lose urine interferes with daily life activities of women, and the time and circumstances leading to urine loss. In this instrument, there is a type Likert scale that assesses how urinary incontinence interfere in the daily lives of people whose score ranges from zero to ten, with zero interference and ten little much.

The aforementioned questionnaire is a valid and reliable tool to measure the quality of life of persons with urinary incontinence instrument. Was originally developed and validated in English by Avery et al. (1999) and validated by Tamanini et al. (2004) In addition to the survey questionnaire by the author for the purpose of raising other data such as walking your health today, how often go to the bathroom during the day, and finally gets up at night to urinate was prepared.

**RESULTS AND DISCUSSION**

In the analysis the mean age of participants was 45.7 years, ranging from a minimum age of 25 years and maximum 80 years, with a standard deviation of 13.08. Among the 46 women, were found urinary incontinence (UI) in a total of 45.45% twenty-two.

Experience with episodes of urinary incontinence is a condition that not only prevalent in older women, but also in young women and in middle age and can understand the need to conduct research and guidelines in younger women and not just with the elderly population. The survey was similar to that of Lopes et al. (2006), in which the age of the women interviewed ranged from 25 to 85 years with a mean of 49.2 years.

As it relates to how much you leak interferes with daily life was reported that 18.18 (four) obtained interference ten 18.18% (four) reported four level, 18.18% (four) three level of interference, 13.63% (three) level zero, ie no nothing interferes, 9.09% (two) level two, 9.09% (two) level six, 4.54% (one) at level eight, 4.54% (one) level seven, finally, in the final analysis one reported 4.54% level one.

The data obtained in these studies corroborate other research with the same aim as that of Lopes et al. (2006), in his work which involved the general female population also found that between 15% and 30% of the time, the UI affected the social, occupational, physical and sexual women of all ages. Also Alves (2009), in his analysis obtained similar results showing

interference with quality of life of women with urinary incontinence were evaluated.

By analyzing how often these women go to the bathroom during the night 41.30% (nineteen) responded a bit, 30.43% (fourteen) more or less, 23.91% (eleven) reported no time, and last only 4.34% (two) described going to the bathroom a lot at night. Thus, it can be seen that 76.07% of the population exhibit symptoms of nocturia. In the study by Reis et al. (2003), nocturia was considered one of the most frequent changes in urinary habits in the course of aging.

When asked about how these women evaluate their health today the following results were obtained 41.30% (nineteen) find its good health, 32.60% (fifteen) assess very good health, 19.56% (nine) reported find normal 4.34% (two) have reported finding bad, and last only 2.17% (one) woman reported finding too bad your health today. Tavares et al. (2011), in his study, with similar results, in which 50% of women considered their health status regularly and 25% poor or very poor.

Regarding the frequency loss of urine in women surveyed 45.45% 22 (ten) reported discharging urine once a week, 27.27% (six) lost two or three times a week, 13.63% (three) once daily, 9.09% (two) reported lost several times a day and 4.54% (one) only reported discharging urine at all times.

About lose urine as the following results 81.81% (eighteen) reports losing only a small amount of urine, 13.63% (three) reported a moderate amount lost, and 4.54% (one) was obtained only reports lose a lot. In the study Rett et al. (2007), when a woman starts to lose urine in smaller amounts, it is less concerned regarding fluid intake, and ends up using less protection, less worries in smelling urine or get wet and consequently improves their clinical condition and wellbeing social.

When questioned about how often go to the bathroom during the day, 50% (twenty-three) reported going a bit, 41.30% (nineteen) will more or less and 8.69% (four) says to go to the bathroom a lot.

Incontinent women rarely talk about their problem or seek medical care because they consider this very condition of age or even in ordinary day to day, and when questioned, most often seek the truth by omitting feeling constrained, and this same reason, do not seek treatment. In the study of Guarisi et al. (2001), he reported that 10% of the women studied did not feel free to talk to the doctor about this problem.

Several scientific studies indicate a positive correlation of physiotherapy in managing patients with SUI. Polden et al. (2002) reported in their study that SUI is perfectly amenable to conservative treatment is the first option of choice for two-third of women are informed about the surgical and non-surgical alternatives. This therapeutic modality has been used as a new treatment option in the UI, either preoperative adjuvant so, in cases of failure of surgical treatment or as an isolated treatment in anticipation of a better quality of life. The physiotherapist is not only qualified to take care of the individual patient, it may also be active in educating community members about the mechanisms of continence and incontinence, and the possible factors that might interfere with this mechanism, since the contemporary trend is the integral approach of the patient, thereby presenting an interest in developing strategies to solve the problem.

The World Health Organization (WHO) recommends physical therapy for patients with urinary incontinence mild to moderate as first treatment, and after physical therapy for about three months, is that one should assess the need for surgical alternatives or pharmacologic (WHO, 2002).

Souza et al. (2002) reported in their study that the role of the physiotherapist perineal re-education of the pelvic floor, aims to improve the strength of contraction of the muscle fibers, promote rehabilitation and a static abdominal pelvic loin rearrangement through exercise, physical therapy equipment and techniques. So these exercises can help strengthen the necessary muscles to maintain urinary continence. The re-education of the pelvic floor musculature becomes imperative in the exercises assigned for patients coming under preventive or even curative form of pathology program, and improve sexual function. However, the best results of physiotherapy treatment of urinary incontinence are obtained in mild or moderate cases, as reported Polden et al. (2002).

As can be seen in our study, there was an interference with quality of life of incontinent women, but even so most participants not considered as a health issue, and perhaps considered it only as a natural process of aging, adaptando- if your daily life, which can perhaps be explained by their lack of information.

So we should highlight this early type of pathology, because it ends up becoming a decline in the quality of life of women. Should be given special attention to this case, implementing specific rehabilitation programs and comprehensive advising communities about the problem and its solutions, thus aiming to intervene in the lives of these incontinent patients and may thus improve the quality of life for them.

## CONCLUSION

In the present study, we found a high prevalence of urinary incontinence among women residing in rural Three Bars of Paraná. Regarding factors related to UI can observe the presence of nocturia, reports of urine leakage at least once a week and frequency of trips to the bathroom changed. Can also be concluded that there was an interference with quality of life of participants, but most are not considered a health problem.

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### **THE PREVALENCE AND IMPACT CAUSED BY URINARY INCONTINENCE IN HEALTH WOMAN ABSTRACT**

**BACKGROUND:** Urinary incontinence became an issue and an increasingly common complaint in gynecology clinics. It is defined as the involuntary loss of urine through the urethra, which results in pain and can intervene in the quality of life making a big impact on the health of these women. **OBJECTIVE:** To assess the prevalence of urinary incontinence in women, verify the factors related to urinary incontinence and the impact on health of incontinent women. **METHODS:** A cross-sectional study and quantitative survey data. The survey was conducted in the city of Three Bars of Paraná (PR) with forty-six women aged 25 to 80 members of the Mothers' Friendship Club. To meet the objective was used International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF) and to complement the survey, a questionnaire was prepared by the author for the purpose of raising other data such as walking your health today, how often will the bathroom during the day, and finally gets up at night to urinate. **RESULTS:** Among the 46 women studied were found urinary incontinence in a total of 45.45% women and 93.46% reported that it still does not interfere with their health. **CONCLUSION:** There was research conducted a high prevalence of urinary incontinence among women residing in rural Three Bars of Paraná, and we observed that there was an interference with quality of life, but most participants did not consider as a matter of health.

**KEYWORDS:** quality of life. Urinary incontinence. Pelvic floor.

### **LA PRÉVALENCE ET L'IMPACT CAUSÉ LA SANTÉ DES FEMMES À L'INCONTINENCE URINAIRE RÉSUMÉ**

**CONTEXTE:** L'incontinence urinaire est devenu un problème et une plainte de plus en plus commun dans les cliniques de gynécologie. Il est défini comme la perte involontaire d'urine par l'urètre, ce qui entraîne des douleurs et peuvent intervenir dans la qualité de vie faire un grand impact sur la santé de ces femmes. **OBJECTIF:** Évaluer la prévalence de l'incontinence urinaire chez les femmes, vérifiez les facteurs liés à l'incontinence urinaire et l'impact sur la santé des femmes incontinentes. **MÉTHODES:** Une étude transversale et des données quantitatives de l'enquête. L'enquête a été menée dans la ville de trois barres de Paraná (PR) avec quarante-six femmes âgées de 25 à 80 membres de l'amitié Club des mères. Pour atteindre l'objectif a été utilisé consultation internationale sur l'incontinence Questionnaire-Short Form (ICIQ-SF) et pour compléter l'enquête, un questionnaire a été préparé par l'auteur dans le but de soulever d'autres données telles que la marche de votre santé aujourd'hui, combien de fois allez la salle de bains pendant la journée, et obtient enfin lever la nuit pour uriner. **RÉSULTATS:** Parmi les 46 femmes étudiées ont été trouvés incontinence urinaire chez un total de 45,45% de femmes et 93,46% ont déclaré que cela ne gêne pas encore avec leur santé. **CONCLUSION:** Il y avait la recherche a mené une forte prévalence de l'incontinence urinaire chez les femmes résidant en milieu rural trois barres de Paraná, et nous avons observé qu'il y avait une atteinte à la qualité de vie, mais la plupart des participants ne considère pas comme une question de santé.

**MOTS-CLÉS:** qualité de vie. L'incontinence urinaire. Plancher pelvien.

### **LA PREVALENCIA E IMPACTO CAUSADO LA SALUD DE LAS MUJERES CON INCONTINENCIA URINARIA RESUMEN**

**ANTECEDENTES:** La incontinencia urinaria se convirtió en un problema y una queja cada vez más común en las clínicas de ginecología. Se define como la pérdida involuntaria de orina a través de la uretra, lo que resulta en dolor y puede intervenir en la calidad de vida haciendo un gran impacto en la salud de estas mujeres. **OBJETIVO:** Evaluar la prevalencia de la incontinencia urinaria en las mujeres, verificar los factores relacionados con la incontinencia urinaria y el impacto en la salud de las mujeres con incontinencia. **MÉTODOS:** Un estudio transversal y datos cuantitativos de la encuesta. La encuesta se llevó a cabo en la ciudad de Três Barras de Paraná (PR) con cuarenta y seis mujeres de entre 25 hasta 80 miembros de la Amistad el Club de Madres. Para cumplir con el objetivo se utilizó Consulta Internacional sobre Incontinencia Cuestionario-Short Form (ICIQ-SF) y para complementar la encuesta, un cuestionario fue preparado por el autor con el fin de recaudar otros datos, tales como pasear a su salud hoy en día, con qué frecuencia va al baño durante el día, y por fin se levanta por la noche para orinar. **RESULTADOS:** Entre las 46 mujeres estudiadas se encontraron incontinencia urinaria en un total de 45,45% mujeres y 93,46% informaron que todavía no interfiere con su salud. **CONCLUSIÓN:** No hubo investigación llevó a cabo una alta prevalencia de la incontinencia urinaria entre las mujeres que residen en zonas rurales Três Barras de Paraná, y se observó que había una interferencia con la calidad de vida, pero la mayoría de los participantes no se consideraba como una cuestión de salud.

**PALABRAS CLAVE:** calidad de vida. La incontinencia urinaria. Piso pélvico.

**A PREVALÊNCIA E O IMPACTO CAUSADO NA SAÚDE DE MULHERES COM INCONTINÊNCIA URINÁRIA****RESUMO**

**INTRODUÇÃO:** A incontinência urinária se tornou um problema e uma queixa cada vez mais frequente nos consultórios de ginecologia. É definida como a perda involuntária de urina pela uretra, que resulta em sofrimento e pode intervir na qualidade de vida causando um grande impacto na saúde dessas mulheres. **OBJETIVO:** Analisar a prevalência de incontinência urinária em mulheres, verificar os fatores relacionados com a incontinência urinária e o impacto causado na saúde das mulheres incontinentes. **MÉTODOS:** É um estudo transversal e quantitativo de levantamento de dados. A pesquisa foi realizada no município de Três Barras do Paraná (PR) com quarenta e seis mulheres entre 25 a 80 anos membros do Clube de Mães Amizade. Para atender o objetivo foi utilizado International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF) e para complementar a pesquisa foi elaborado um questionário pela autora para fins de levantamento de outros dados de como anda sua saúde hoje, com que frequência vai ao banheiro durante o dia, e por último se levanta a noite para urinar. **RESULTADOS:** Dentre as 46 mulheres pesquisadas foi possível encontrar incontinência urinária em um total de 45,45% mulheres sendo que 93,46% relataram mesmo assim não interferir na sua saúde. **CONCLUSÃO:** Constatou-se na pesquisa realizada uma elevada prevalência de incontinência urinária entre mulheres que residem na zona rural de Três Barras do Paraná, sendo observado que houve uma interferência na qualidade de vida, porém a maioria das participantes não a considerava como um problema de saúde.

**PALAVRAS-CHAVE:** Qualidade de vida. Incontinência urinária. Assoalho pélvico.