190 - ANALYSIS OF QUALITY OF LIFE IN WOMEN WITH URINARY INCONTINENCE

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Ageing process causes the elderly are more vulnerable to disease, these factors combined will ultimately bring a decreased quality of life of the elderly. One of the changes at this age is commonly referred to the Urinary Incontinence (BARACHO, 2007).

The female urinary incontinence (UI), is today a major public health problem, while 25% of the adult female population suffers from this problem. To worsen the situation, it is known that since this tends to grow as the population age increases (CAVALCANTI et al, 2004).

The prevalence of IU is in the elderly, ranging from 8 to 34% at the discretion or method of evaluation. The accurate diagnosis is important for the proper management that may require measures that are only based on guidelines or changes in habits, but also the use of medicines, invasive methods that may include specific surgical procedures. (MARTINS et al, 2007).

The IU is often wrongly interpreted as a natural part of aging, changes that threaten the sociability as shame, depression and isolation often make part of this clinical case, causing great inconvenience to patients and families. (Gonçalves et al, 1992).

According Amaro et al, (1997), the main risk factors for the development of the UI are multiparity, menopause and prior pelvic surgery, genetic predisposition, alteration of collagen and emotional disorders.

With the increase in life expectancy of women, the IU has become an important cause of limitation of activity in advanced age groups, mainly between 45 and 54 years have the disorder, and that half of the cases are associated with bladder and womb prolapses. (RAMOS et al, 2000).

The quality of life is related to the self-esteem to the welfare personal and covers various aspects such as functional capacity, emotional state, the members-economic levels, social interaction, self-care, family support, the state of health, lifestyle, satisfaction with our jobs and/or daily activities and the environment in which we live (FIAMINGHI et al., 2004)

The meaning of old age is nothing more than a social construction. The idea that we have today of old age probably originated in the industrial society, a period that occurred under a chronological approach. The segment of the population that is taking the biggest proportional increase is formed by people over 60 years, determining a future concern with several economic and social problems, especially with the health maintenance The elderly really have more chronic diseases such as arthritis , hypertension, hearing and heart changes. All of them don't mean, however, that the elderly can not function in society (FIAMINGHI et al., 2004).

According Who (1996) apud Martins et al., (2007) the best definition of Quality of Life was given by WHO, with a broad definition and cross, as the perception of the individual from their position in life, in the context of culture, value system in which he lives regarding their expectations and standards of living.

MATERIALS AND METHODS

This research was discussed as a field study of intentional exploratory probability of a non-quantitative and qualitative in nature, held to solving a specific problem, which is the evaluation of the quality of life of women with urinary incontinence with higher age to fifty and five years.

As a criterion for inclusion was: women over fifty-four years, with complaints of urinary losses for the efforts, characterizing the SUI, which signed the end of consent free and informed then respond to the questionnaire, knowing that this would not result in charge. The voluntary age should have equal or greater than fifty-five years, and find itself in the same socio-cultural level.

Among the exclusion criteria were met the following conditions: virgin patients, with a history of chronic diseases and / or related acute identifiable, genital prolapse or recent history of gynecological surgery.

It is noteworthy that the number of patients who were interviewed was of 108 women, but not due to complete the term of consent 5 were excluded, 3 by incomplete questionnaires and 8 unfilled criteria for inclusion and exclusion. The data collection was given by the questionnaire responses from the quality of life "ICIQ-SF", which assesses the symptoms of low urinary tract which has undergone the process of translation, cultural adaptation and validation for the Portuguese language by Tamanini et al (2004). The questionnaire was used by a person previously trained for the procedure.

The instrument for data collection applied to patients evaluated the impact of urinary incontinence in the limitations of daily activities, both physical, social as in personal relationships, like emotions, sleep and disposal. Each question on the quality of life of the research subject was discussed separately in order to qualify what the most relevant aspects and disabling of female urinary incontinence.

The ICIQ-SF is a simple questionnaire, brief and self-manageable which assesses the impact of urinary incontinence in the quality of life and qualification of the urinary loss of patients examined. The questionnaire consists of four questions that assess the frequency, severity and impact of urinary incontinence, and a set of eight items of self, or causes related to the cases of urinary incontinence experienced by patients. The score is by general summation of the answers of the questions 03, 04 and 05.

The instrument was used due to evaluate the quality of life and, especially, to study the prevalence of UI in one of the Basic Health Units of Cascavel.

This survey was conducted for 15 days, 03 hours a day. People were addressed by 1 interviewer, academic of Physiotherapy, which addressed the elderly on loss of urine and who wanted to respond to the questionnaire. Just one person has not agreed to respond. For those who are not literate, the questionnaire was read without any interference in the answers, when someone questioned on a question, read up again the same.

The questionnaire consists of 06 questions: date of birth, sex, frequency of leaking, quantity of leaking, urinary loss of interference in daily life, and when the loss of urine.

RESULTS AND DISCUSSIONS

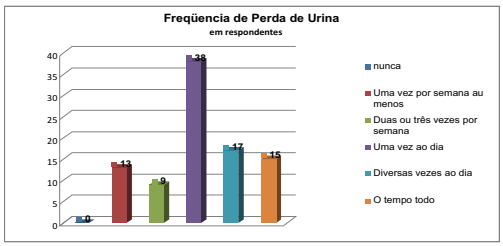
For the development of graphs and tables was used the programs Microsoft Excel and SSP-SS, which served as tools of support for the composition of results.

The first item was found on respondents' age, the age group most affected by the problem of UI was 65 to 74 years. The literature shows us that the highest incidence of IU is at elderly women, due to several events during their lives as: pregnancy,

menopause, aging, among other well-characterized in this study (BICALHO, 1999, DENIS, 2001, ABRAMS , 2002, GROSSE, 2002, ICS, 2005).

The loss of urinary continence is a condition uncomfortable, embarrassing and stressful. As the urinary incontinence is not cause of mortality and morbidity, yes, it is important to evaluate how it interferes with the daily life of people, thereby detecting the size of the problem in the life of each individual, viewing the UI to create strategies for treatment.

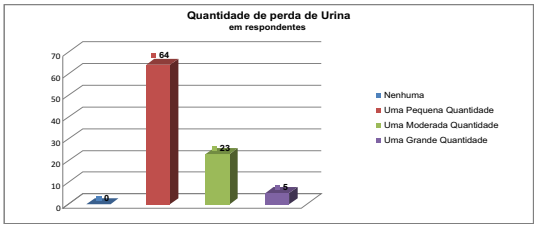
Chart 1 - Frequency of loss urinary: "How often do you lose urine? (Check one answer)



Source: Data for the author, 2008.

We see that the most relevant item is 38% of respondents lose urine once a day, and that 0 of all interviewees never lost urine. Urinary incontinence can have different degrees and will be marked as a nuisance created by few drops of urine that escape during a laugh or a cough or as a constant loss, which puts the individual in a situation of shame and isolation before friends, family and society (SELEME, 2006).

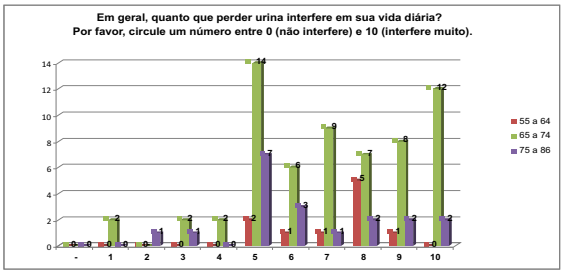
Chart 2 - Quantity of urinary loss: "We would like to know the amount of urine you think you lose." (Check one answer).



Source: the author, 2008.

It appears that the percentage is higher in small amounts of loss of urine, and that 64 of the 92 respondents gave the same answer. We must clarify that the person quantifies how much he/she understands. As Tamanini et al (2004), even if the loss is small it can drastically affect the quality of life of the individual. So the International Continence Society (ICS) suggests that any assessment of urinary incontinence has a questionnaire on quality of life, as this condition leads to changes psychological, physical, social, economic, relationships, among other things, they do not generate only problems of self-esteem, but also depression and isolation.

Chart 3 - interference in daily life. "In general, how many lose urine interferes in their daily lives? Please circulate a number between 0 (not interfere) and 10 (interferes too).

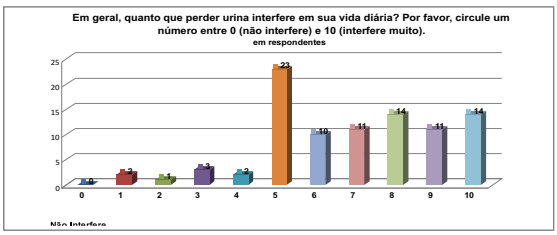


No matter how many loss of urine, the degrees of involvement were similar in age from 55 to 64 is in Grade 8, this figure means a large involvement in everyday life. Even in the age bracket of 65 to 74 and between 75 and 86 years is located on 5 which means an average involvement on the daily activities.

Regardless of age it is clear that people suffer from the loss of urine and that this change their everyday lives, even more it has appeared that the population over 55 years is already retired, but it is believed that these scores could be much higher in younger individuals.

Combining all age groups was also noted that the involvement is median, as the chart below.

Chart 4 - interference in daily life - in respondents. "In general, how many lose urine interferes in their daily lives? Please circulate a number between 0 (not interfere) and 10 (interferes too).



FINAL CONSIDERATIONS

As the purpose of the study was to describe the impact of UI on the quality of life of elderly women, used as a quantitative questions the quality of life survey that showed that urinary incontinence affects medially the quality of life of these women. The data may have been low due the lack of knowledge about the disease, not to know that there are various forms of conservative treatment or not.

As for the age group affected by urinary incontinence, this study said the findings bibliographic already pointed that IU is

prevalent but not inherent in the elderly population.

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ANALYSIS OF QUALITY OF LIFE IN WOMEN WITH URINARY INCONTINENCE

RESUME

The problem of research that leads this work was: Does Urinary Incontinence influence quality of life of women over fifty-five years old? The general purpose from looking for answers was to find out the incidence and the impact of Urinary Incontinence in women with age equal or above fifty-five years. Exploratory research was realized to apply a questionnaire (ICIQ- SF) about the conditions of life and health and how the problems of Urinary Incontinence influence the life of these women. As the result from this work, among 108 women, 92 of them complained of their momentaneous quality of life. At this research, the Urinary Incontinence is a serious problem of public health in our country and, without doubts, affects the quality of life of people with this patology.

Keywords : Urinary Incontinence, Aged , Quality Of Life.

ANALYSE DE LA QUALITÉ DE VIE DES FEMMES AVEC L'INCONTINENCE URINAIRE.

REPRENDRE

Le problème de la recherche qui mène ce travail était la suivante: incontinence urinaire-t-elle influencer la qualité de vie des femmes de plus de cinquante-cinq ans? L'objectif général de la recherche de réponses était de découvrir l'incidence et l'impact de l'incontinence urinaire chez les femmes avec l'âge supérieur ou égal à cinquante-cinq ans. Recherche exploratoire a été réalisée à appliquer un questionnaire (SF-ICIQ) sur les conditions de vie et de la santé et comment les problèmes d'incontinence urinaire influencer la vie de ces femmes. À la suite de ce travail, parmi 108 femmes, 92 d'entre eux se plaignaient de leurs momentaneous qualité de vie. Au cours de cette recherche, l'incontinence urinaire est un grave problème de santé publique dans notre pays et, sans doute, affecte la qualité de vie des personnes atteintes de cette patology.

Mots-clés: incontinence urinaire, personnes âgées, la qualité de vie.

ANÁLISIS DE LA CALIDAD DE VIDA EM MUJERES CON INCONTINÊNCIA URINÁRIA

RESUMEN

El problema de investigación que guiaron todo el trabajo fue la siguiente pregunta: La incontinencia urinaria afecta a la calidad de vida de las mujeres mayores de 55 años de edad? En busca de respuestas establecido como objetivo general: determinar la incidencia y el impacto de la incontinencia urinaria en mujeres de menos de 55 años. Se celebró una investigación exploratoria que se aplicó un cuestionario (ICIQ-SF) sobre las condiciones de vida y la salud y la forma en que los problemas de incontinencia urinaria afecta a las vidas de estas mujeres. Como resultado de la búsqueda sobre el terreno, tenía una población de 108 mujeres, alcanzando la muestra de 92 mujeres con la enfermedad y que se quejó a su calidad de vida momentánea. Se puso de manifiesto a través de esta investigación que la incontinencia urinaria es un problema grave de salud pública en nuestro país y que afecta a la calidad de vida de las personas con esta condición.

Palabras clave: Incontinencia urinaria, Ancianos, la calidad de vida.

ANÁLISE DA QUALIDADE DE VIDA DE MULHERES COM INCONTINÊNCIA URINÁRIA.

RESUMO

O problema de pesquisa que norteou todo o trabalho foi a seguinte indagação: A incontinência Urinária afeta a qualidade de vida de mulheres acima de 55 anos de idade? Na busca da resposta estabeleceu-se como objetivo geral: verificar a incidência e o impacto da incontinência urinária em mulheres com idade igual ou superior a 55 anos. Foi realizada uma pesquisa exploratória onde aplicou-se um questionário (ICIQ-SF) acerca das condições de vida e saúde e no modo pelo qual os problemas de incontinência urinária afetam a vida dessas mulheres. Como resultado da pesquisa de campo, encontrou-se uma população de 108 mulheres, atingindo amostra de 92 mulheres com a doença e que queixavam-se da sua qualidade de vida momentânea. Mostrou-se através desta pesquisa que a incontinência urinária é um grave problema de saúde pública no nosso país e que afeta a qualidade de vida dos indivíduos com essa patologia.

Palavras-chave: Incontinência Urinária, Idosos, Qualidade de Vida.