44 - IMPACT OF QUALITY OF LIFE IN FRONT OF URINARY INCONTINENCE IN OLDER PEOPLE'S

YASMIN WEILER SILVÉRIO;
LIZYANA VIEIRA
FACULDADE ASSIS GURGACZ - FAG, CASCAVEL, PARANÁ, BRASIL
ywsilverio@hotmail.com

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INTRODUCTION

The rapid aging of the population has been observed in our environment and thus need to adopt new policies and programs for the elderly, in view of the characteristics and needs of this population in Brazil. Their rights were recently provided by the Elderly, forcing society to create conditions to promote independence, integration and participation of the elderly in society (BENEDETTI et al.; 2006). In accordance with this Statute, is considered elderly individuals over 60 years of age (Estatuto do Idoso Lei n. 10.741).

In this age group, the risk of diseases and impairments as to physical, mental and social functionality increase, also marked by dependency, loss of autonomy, social isolation and depression. However, if individuals grow older in good physical health, fulfilling social roles, staying active and enjoying a sense of personal significance, quality of life can be very good (PASCHOAL, 2002).

Although aging is physiological, is seen by society more vulnerable to disease and may interfere with the autonomy, mobility, manual dexterity, lucidity and functional capacity of the lower urinary tract and bladder, favoring urinary incontinence (Abreu et al.; 2007). Urinary Incontinence (UI) can be defined as the complaint of any involuntary leakage of urine. Can be classified into stress urinary incontinence (SUI) defined by a complaint of involuntary loss of urine after coughing, sneezing or physical exertion, urge incontinence described as the complaint of involuntary leakage of urine accompanied by or immediately preceded by urgency, ie sudden urge to urinate and difficulty deferrable or mixed urinary incontinence (UI) that is a combination of SUI and urge incontinence (FIGUEREDO; CRUZ, 2008).

For Oliveira e Garcia (2011), although it can occur in all age groups, the incidence of urinary incontinence increases with age. Older people tend to ignore the symptoms, for shame or feel normal and get used to the loss (HONÓRIO, 2008; PASCHOAL, 2002).

Several factors are related to the occurrence of symptoms of urinary incontinence, including advanced age, pregnancy, childbirth, estrogen levels drop during menopause, the treatment of prostate cancer, mental and physical disabilities and some prevalent diseases in elderly as stroke and Parkinson's disease, and drugs and surgeries that are potentially capable of causing decreased pelvic muscle tone and / or generate nerve damage (SILVAE SANTOS, 2005).

Seeking these damages, physical therapy aims to reeducation and strengthening the muscles of the pelvic floor aimed at preventing and treating UI through education of voiding function, information about the proper use of the muscles, as well as learning techniques and exercise to acquire muscle strengthening. It is known that urinary incontinence affects directly the quality of life, which pointed to by this individual satisfaction or happiness with life in the aspects considered important by the individual. The UI could adversely affect the physical, mental and social aspects of elderly incontinent. Regarding social effects, urinary incontinence prevents the elderly leaving home, going to parties and to the club, going on long trips, attend church and participate in physical activities such as walking, running, playing and dancing. Thus, resulting in social withdrawal, the embarrassment caused by this disease (OLIVEIRA; GARCIA, 2011).

The World Health Organization (WHO) recommends evaluating the quality of life in incontinent individuals, because its measurement is a useful for assessing the outcome of the chosen and facilitates the comparison of studies conducted in different locations treatment parameters. Furthermore, it allows the patient to be involved and have a visual perception of the evolution of their treatment and comparing the improvement in their daily activities (RETT et, al. 2007).

Given that the elderly population is growing significantly and so, consequently, the UI have a higher prevalence among these individuals, we see the importance of evaluating the impact on quality of life in elderly incontinent for that professional supervision is efficient for treatment, thereby achieving improved presentation of loss and thus also improve the welfare of elderly incontinent.

Therefore, the objective of the research was to determine the prevalence of UI in the elderly of both sexes, to assess the impact of quality of life in view of urinary incontinence and analyzing the predominant time of loss.

METHODS

The sample consisted of 50 elderly volunteers of both sexes. Individuals above 60 years of age were included, and excluded those who refused to answer the questionnaire and / or signing the consent form.

The research was characterized as a quantitative cross-sectional study, conducted through a questionnaire, which was applied during the months of May and June 2014, at a Family Center, which provides care to the community, maintained by the Assisi Foundation Gurgacz - FAG in Cascavel, PR.

The phase of data collection began with the presentation of the survey volunteers through a lecture, guiding on urinary incontinence. Against the definition of urinary incontinence according to the International Continence Society (ICS) as the complaint of any involuntary leakage of urine (HIGA, 2009). Participants signed a consent form and then completed a questionnaire called the International Consultation on Incontinence Questionnaire - Urinary Incontinence / Short Form (ICIQ / SF), adapted to the Portuguese language. This is a simple, brief and self-manageable questionnaire chosen to assess the impact of urinary incontinence (UI) on quality of life and urinary loss of the qualification of the patients analyzed. The ICIQ / SF consists of four questions that assess frequency, severity and impact of UI, and one last question, composed of eight items related to the time of urine loss experienced by respondents. The overall score is obtained by summing the scores of questions 3, 4 and 5. The higher the score the impact on quality of life (Grossl, et. Al., 2008). The impact on quality of life was divided in such a way: No impact (0); Slight impact (1-3 points); moderate impact (4 to 6 points); Severe impact (7 to 9 points); and very severe impact (10 points or more) (RICCETO et. al., 2005).

Participants received all necessary clarifications before, during and after the research. All quantitative data were entered on an Excel spreadsheet, program version 2010. This study was approved by the ethics committee of the institution.

RESULTS AND DISCUSSION

50 volunteers participated in this study, 25 female and 25 male, mean age of participants was 69.8 years (SD ± 6.22), 44% of these, there are equivalent (22) individuals reported no loss urine and 56% (28) subjects had some complaint of urinary

incontinence, and 35.7% were male (10) and 64.3% of females (18).

Also observed high prevalence of UI in women in epidemiological studies, cross-Santos and Santos (2010), covering a total population of 519 individuals, aged ≥ 18 years living in urban Landing Alegre, obtaining a prevalence Urinary Incontinence grown from 21.1% in the general population, 32.9% in women and 6.2% in men.

Also in the Skarpa and Herrmann (2005) research, conducted in the United States of America it was found that among 13 million IU to 11 million (85%) were female.

In relation to the sum of the issues concerning the quality of life of incontinence can be seen that 2% (1) showed a slight impact; 6% (3) moderate impact; 2% (1) severe impact and 46% (23) very serious impact.

Also the study of Borges et al. (2009) found significant impact on quality of life in incontinent individuals. Their study consisted of 50 women, aged 18 years, who had to respond to the Kings Health Questionnaire and two independent scales to assess the severity of urinary incontinence, the presence and intensity of symptoms, which can observe a lot of interference in quality of life (50%).

When asked about the time of loss, 22% (11) responded that they lose little urine before reaching the toilet, 14% (7) said that they lose when they are sleeping, 16% (8) respondents who lose urine when you cough or sneeze 4% (2) responded lose all the time, 0% answered other possibilities which indicated loss when performing physical activity, or dress, or for no obvious reason.

The study Lazari et al. (2009) also showed a high percentage of loss of urine just before you get to the bathroom, then the time during coughing or sneezing. A descriptive cross-sectional study was conducted, the sample consisted of 22 women, aged over 60 years, in which all had complaint of loss of urine. Data collection was also performed using the International Consultation on Incontinence Questionnaire Questionnaire - Urinary Incontinence / Short Form (ICIQ / SF). It was then observed that (21.3%) of these lost little urine before reaching the toilet and (19.1%) when they cough or sneeze.

Given the results of this research and present the quality of life of this population losses, is required careful attention to the symptoms of urine leakage, increasing about urinary incontinence present in society, emphasizing on the programs of existing treatments, also raising awareness about respecting incontinent and the importance of seeking a professional and inform the family about the presence of this damage, thereby decreasing the shame and shyness facing the loss of urine, thereby improving the quality of life of these individuals.

Treatment of UI may be opting for conservative or surgical. Conservative treatment should be the first to be chosen because it is less invasive, does not harm the individual has less rate of side effects. Includes exercises to strengthen the pelvic floor and vaginal electrical stimulation, biofeedback, vaginal cones and basic behavioral guidelines, which have potential benefits (BARACHO et. Al., 2006).

As the study of Garcia and Oliveira (2011) shows, with elderly women who complained of urinary incontinence. The study group consisted of 11 elderly women, average age 74.2 years. Before and after treatment, physical therapy evaluation were performed urogynecological; applied questionnaire of quality of life Kings Health Questionnaire (KHQ); and group attendance at weekly sessions consisting of exercises for the pelvic floor muscles for a period of three months. There was a reduction in the mean frequency of nocturnal urination (3 versus 1.5) and the average number of cases of stress urinary incontinence (3.72 versus 1.45). Considering the quality of life questionnaire, we observed a significant reduction in mean and median scores in almost all areas. Completing the Pelvic floor muscle exercises were positive for improvements on the loss of daily urine and relief of the signs and symptoms and quality of life.

In the study of Knorst (2013), participated in 55 elderly women with medical diagnosis of UI, which was submitted before the intervention to an interview and have evaluated the function of the pelvic floor muscles and applied the questionnaire (KHQ) on quality of life . 15 sessions were held, one of them a week, with transvaginal electrical stimulation and training of the pelvic floor muscles, the treatment can be stopped when the participant reported not having urine leakage or express a desire to disrupt the sessions, in addition to the final to conduct a reassessment and reapply the questionnaire, the participant was asked if he considered himself continent, satisfied with the treatment or not noticed improvement. After the intervention, 90.9% of them considered themselves satisfied and continents. Physical therapy treatment resulted in improved quality of life and was effective when it relates to urine leakage.

CONCLUSION

The study revealed a high prevalence of urinary incontinence in elderly females compared to males.

At the moment much of incontinent individuals reported having a serious impact on their quality of life, ie, with losses in their daily activities.

And as regards the time of loss, the most cited by volunteers were lost just before reaching the toilet.

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Rua Aroeira, nº 350, Cascavel, Pr

IMPACT OF QUALITY OF LIFE IN FRONT OF URINARY INCONTINENCE IN OLDER PEOPLE'S

ABSTRACT

Introduction: Although aging is physiological, is seen by society more vulnerable to disease and may interfere with the autonomy, mobility, manual dexterity, lucidity and functional capacity of the bladder and lower urinary tract, favoring the emergence of Urinary Incontinence (IU). The UI is present in the whole population, it is the complaint of any involuntary leakage of urine, negatively affecting the quality of life of incontinent people.Objective: To determine the prevalence of UI in the elderly of both sexes, to assess the impact of quality of life in front of urinary incontinence and the moment of loss prevalent in this population.Methods: 50 elderly people above 60 years of age were interviewed, a center that serves the community of Cascavel - PR. The volunteers answered a questionnaire, called International Consultation on Incontinence Questionnaire - Urinary Incontinence / Short Form (ICIQ / SF), adapted to the Portuguese applied in May and June 2014. For statistical analysis, the data were tabulated in Microsoft Office Excel 2010 and later analyzed by the researcher.Results: 44% of our volunteers do not show loss of urine and 56% of individuals have some type of urinary incontinence, with 35.7% male and 64.3% female. As for the impact of quality of life in incontinent individuals, 46% reported very severe impact. Regarding the moment of urine loss, lose 22% just before reaching the toilet and 16% lose when they cough or sneeze.Conclusion: The study revealed a high prevalence of urinary incontinence in elderly women. Much of incontinent individuals reported having a serious impact on their quality of life. And as regards the timing of urine loss, the most cited by volunteers were lost just before reaching the toilet.

KEYWORDS: Urinary Incontinence; Aged; quality of Life.

IMPACT DE LA QUALITÉ DE VIE EN FACE DE L'INCONTINENCE URINAIRE CHEZ LES PERSONNES ÂGÉES

RÉSUMÉ

Introduction: Bien que le vieillissement est physiologique, est considérée par la société plus vulnérables à la maladie et peuvent interférer avec l'autonomie, la mobilité, la dextérité manuelle, la lucidité et la capacité fonctionnelle de la vessie et des voies urinaires basses, favorisant l'émergence de l'incontinence urinaire (IU). L'interface utilisateur est présent dans l'ensemble de la population, il est la plainte de toute fuite involontaire d'urine, ce qui affecte négativement la qualité de vie des personnes incontinentes. Objectif: déterminer la prévalence de l'IU chez les personnes âgées des deux sexes, d'évaluer l'impact de la qualité de la vie en face de l'incontinence urinaire et le moment de la perte répandue dans cette population. Méthodes: 50 personnes âgées de plus de 60 ans ont été interrogés, un centre qui dessert la communauté de Cascavel - PR. Les bénévoles ont répondu à un questionnaire, appelé consultation internationale sur l'incontinence Questionnaire - Incontinence urinaire / Short Form (ICIQ / SF), adapté à la portugaise appliqué en Mai et Juin 2014. Pour l'analyse statistique, les données ont été compilées dans Microsoft Office Excel 2010 et plus tard analysée par le chercheur. Résultats: 44% de nos bénévoles ne montrent pas de perte d'urine et 56% des personnes ont un certain type de l'incontinence urinaire, avec 35,7% d'hommes et 64,3% de femmes. Quant à l'impact de la qualité de vie des personnes incontinentes, 46% ont déclaré impact très grave. En ce qui concerne le moment de la perte d'urine, perdre 22% juste avant d'atteindre les toilettes et 16% perdent quand ils toussent ou éternuent. Conclusion: L'étude a révélé une forte prévalence de l'incontinence urinaire chez les femmes âgées. Beaucoup de personnes incontinentes ont déclaré avoir un sérieux impact sur leur qualité de vie. Et en ce qui concerne le moment de la perte d'urine, le plus souvent cité par les bénévoles ont été perdus juste avant d'atteindre les toilettes.

MOTS-CLÉS: Incontinence urinaire; personnes âgées; qualité de la vie.

IMPACTO DE LA CALIDAD DE VIDA EN FRENTE DE LA INCONTINENCIA URINARIA EN MAYORES POPULAR

RESUMEN

Introducción: A pesar de que el envejecimiento es fisiológica, es visto por la sociedad más vulnerables a las enfermedades y puede interferir con la autonomía, la movilidad, la destreza manual, la lucidez y la capacidad funcional de la vejiga y el tracto urinario inferior, lo que favorece la aparición de la incontinencia urinaria (IU). La interfaz de usuario está presente en toda la población, es la queja de cualquier pérdida involuntaria de orina, lo que afecta negativamente la calidad de vida de las personas con incontinencia. Objetivo: Determinar la prevalencia de IU en los ancianos de ambos sexos, para evaluar el impacto de la calidad de vida frente a la incontinencia urinaria y el momento de la pérdida frecuente en esta población. Métodos: 50 ancianos mayores de 60 años de edad fueron entrevistados, un centro que sirve a la comunidad de Cascavel - PR. Los voluntarios respondieron un cuestionario, denominado Consulta Internacional sobre Incontinencia Cuestionario - Incontinencia Urinaria / Short Form (ICIQ / SF), adaptada al portugués aplicado en mayo y junio de 2014. Para el análisis estadístico, los datos fueron tabulados en Microsoft Office Excel 2010 y más adelante analizado por el investigador. Resultados: 44% de nuestros voluntarios no muestran pérdida de orina y 56% de los individuos tienen algún tipo de incontinencia urinaria, con 35,7% de hombres y 64,3% de mujeres. En cuanto al impacto de la calidad de vida de las personas incontinentes, 46% informó impacto muy severo. En cuanto al momento de la pérdida de orina, perder el 22% justo antes de llegar al baño y el 16% pierde cuando tosen o estornudan. Conclusión: El estudio reveló una alta prevalencia de la incontinencia urinaria en mujeres de edad avanzada. Gran parte de las personas con incontinencia informaron tener un grave impacto en su calidad de vida. Y en cuanto al momento de la pérdida de orina, los personajes más citados por los voluntarios se perdieron justo antes de llegar al baño.

PALABRAS CLAVE: Incontinencia urinaria; Ancianos; calidad de vida.

IMPACTO DA QUALIDADE DE VIDA FRENTE À INCONTINÊNCIA URINÁRIA EM INDIVÍDUOS IDOSOS

RESUMO

Introdução:Embora o envelhecimento seja fisiológico, é visto pela sociedade com maior vulnerabilidade às doenças, podendo interferir na autonomia, mobilidade, na destreza manual, na lucidez e na capacidade funcional das vias urinárias inferiores e da bexiga, favorecendo ao aparecimento de Incontinência Urinária (IU). A IU está presente em toda a população, sendo ela a queixa de qualquer perda involuntária de urina, afetando de forma negativa a qualidade de vida de pessoas incontinentes. Objetivo:Verificar a prevalência da IU em idosos de ambos os sexos, avaliar o impacto da qualidade de vida frente a incontinência urinária e o momento da perda predominante nesta população.Métodos: Foram entrevistados 50 idosos, acima de 60 anos de idade, de um Centro que presta serviços a Comunidade de Cascavel - PR. Os voluntários responderam um questionário, denominado International Consultation on Incontinence Questionnaire – Urinary Incontinence/Short Form (ICIQ/SF), adaptadopara a língua portuguesa, aplicado no mês de maio e junho de 2014. Para a análise estatística, os dados foram tabulados no Microsoft Office Excel 2010 e posteriormente analisados pelo pesquisador. Resultados: 44% dos voluntários estudados não apresentam perda de urina e 56% indivíduos apresentam algum tipo de Incontinência Urinária, sendo 35,7% do sexo masculino e 64,3% do sexo feminino. Quanto ao impacto da qualidade de vida nos indivíduos incontinentes, 46% relataram impacto muito grave. Quanto ao momento da perda de urina, 22% perdem pouco antes de chegar ao banheiro e 16%perdem quando tossem ou espirram. Conclusão:O estudo revelou alta prevalência de Incontinência Urinária em idosos do sexo feminino. Grande parte dos indivíduos incontinentes relatou possuir um impacto muito grave em sua qualidade de vida. E no que se diz respeito ao momento da perda urinária, a mais citada pelos voluntários foi perder pouco antes de chegar ao banheiro.

PALAVRAS-CHAVE: Incontinência Urinária, idoso, qualidade de vida.