

# What underlies the belief that urinary incontinence is normal for aging?

## An exploratory analysis

Christina Shaw

Adrian Wagg

Department of Medicine, University of Alberta, Edmonton, Alberta



# Faculty/Presenter Disclosure

- **Faculty:** Christina Shaw
- **Relationships with financial sponsors:**
  - none to declare

# Disclosure of Financial Support

- none to declare
- **Potential for conflict(s) of interest:**
  - not applicable

# Mitigating Potential Bias

- not applicable

# Definitions

Urinary Incontinence (UI) is defined as involuntary loss of urine

- stress UI: involuntary loss of urine on effort, physical exertion, or sneezing/coughing
- urgency UI: involuntary loss of urine associated with urgency
- mixed UI: a combination of stress and urgency UI <sup>1</sup>

1. Urology, 2003. **61**(1): p. 37-49.

# Epidemiology

- UI is common
  - prevalence ranges from 12% to 55%
  - Canadian Urinary Bladder Survey (2008): 28.8% of adult women <sup>2</sup>
- UI prevalence increases in association with increasing age <sup>3</sup>

2. BJU Int, 2008. 101(1): p. 52-8.

3. J Public Health Med, 2000. **22**(3): p. 427-34.

# Importance

- UI is associated with:
  - adverse health outcomes including falls, fractures, UTIs, and depression
  - increased risk of institutionalisation
  - increased healthcare resource use <sup>4</sup>

# Perceptions

- UI is commonly believed to be a normal part of aging <sup>5</sup>
  - may reflect normalisation of symptoms in later life
  - may contribute to well described delays in health care seeking



# Aim

- to describe what health related factors are associated with the belief that UI is normal for aging

# Method

- secondary data analysis of a large multi-national RCT <sup>6</sup>
- setting: community organisations in and surrounding two large Canadian cities, recruited via advertising
- inclusion: women >50, screened for the primary study (ie both those eligible and ineligible for the primary study)
- exclusion: unable to communicate in English or French, incomplete surveys, diagnosed dementia, nursing home residents
- measures: overall state of health (SF-12), frequency and type of incontinence (ICIQ-FLUTS), quality of life (I-QOL)
- analysis: SPSS

# Results

n = 4996

Age (mean  $\pm$  SD): 78.2  $\pm$  9.0

BMI (mean  $\pm$  SD): 26.6  $\pm$  5.6

Incontinence diagnosis: 2022 (45.5%)

stress UI: 729 (16.4%)

urgency UI: 453 (10.2%)

mixed UI: 840 (18.9%)

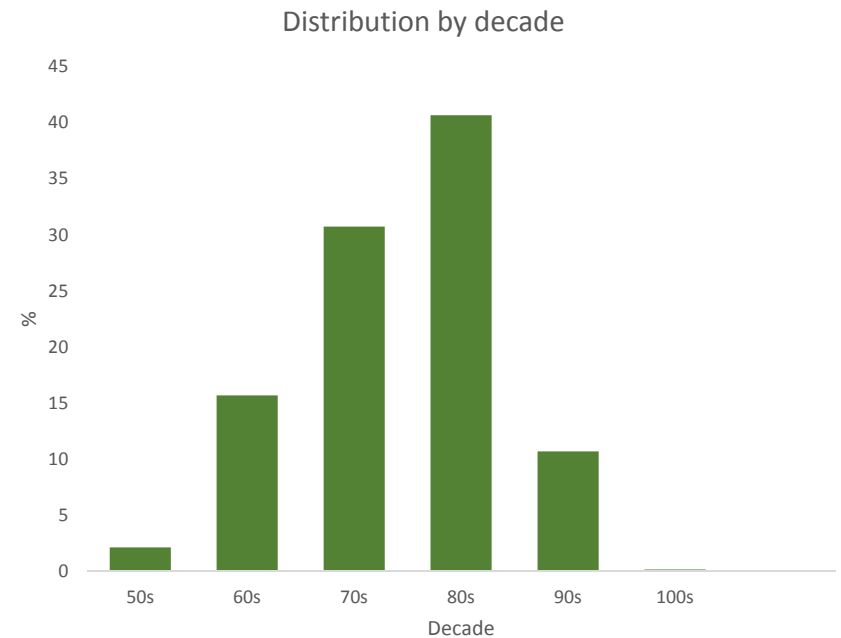
Quality of life

n = 3579 ( $\geq$  19 responses on I-QOL)

I-QOL (mean  $\pm$  SD): 84.7  $\pm$  19 / 100

UI: 76.4 / 100

no UI: 93.1 / 100



- **68.6%** (2149) believed incontinence was normal for aging
  - diagnosis of UI: 83.7%
  - no diagnosis of UI: 60.2%

# Previous analysis

The belief that UI was normal for aging was statistically significantly associated with:

- frequency of urine leakage, up to once per day
- number of pads used, up to 2 per day
- more impaired quality of life <sup>5</sup>

# Results

Women who believed incontinence normal for aging:

- were older  
(78.4 v 77.5,  $p=0.004$ )
- had a higher BMI  
(26.3 v. 25.7,  $p=0.003$ )

# Results

Women who believed incontinence normal for aging reported:

lower levels of overall health

*very good or excellent* health: 33.9% v 38.8% ( $\chi^2 = 117.7$ ,  $p < 0.001$ )

lower levels of energy

a lot of energy *most or all of the time*: 37.1% v 40.3% ( $\chi^2 = 238.2$ ,  $p < 0.001$ )

more limitations in their daily activities

46.6 % v 43.4 % ( $\chi^2 = 234.5$ ,  $p < 0.001$ )

feeling down-hearted and blue more often

*most or all of the time*: 5.2% v 4.1% ( $\chi^2 = 262.1$ ,  $p < 0.001$ )

# Discussion

- 2/3 of older community dwelling women believe incontinence is normal for aging
- Women who held this belief were more likely to be older and have a higher BMI
- Women who held this belief were more likely to report lower levels of overall health and energy, limitations in their daily activities, and higher frequency of feeling downhearted and blue.
- The belief that incontinence is normal for aging may reflect another facet of unhealthy aging



# Conclusion

- The belief that UI is normal for aging is common
- This belief is associated with poorer overall health
- Attitudes to UI are a barrier to health care seeking
- This barrier may be amenable to change



Capital Health Research Chair in Healthy Ageing

