18th World Congress on Clinical Nursing & Practice

September 21-22, 2018 | Prague, Czech Republic

Prevalence, affecting factors and impact on quality of life of urinary incontinence

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Urinary incontinence is a social and hygienic problem that can be seen in women of every age group, which can cause the quality of life to deteriorate and affect the domestic and social life of the woman at a significant level both physically and psychologically. This study was carried out descriptively and cross-sectional between January 2015-June 2015 at the Aegean Maternal and Women's Diseases Training and Research Hospital in İzmir. The sample of the study was consisted of 304 volunteer women living with urinary incontinence. Data from the study were collected with urinary incontinence form, individual description form and urinary incontinence quality of life scale (I-QOL). In this study, the mean age of the women was 47.61±11.43, 27% of them had stress, 35.2% of urge and 37.8% of mixed urinary incontinence. The majority of women experience urinary incontinence one-two times a day (42.4%) and for one-two years (33.2%). The mean of the total score of women I-QOL was 79.57±15.05 and the mean of the total scores obtained from the subscales was; limitation of behaviors was 27.03±5.86, psychological effect was 36.14±6.50, and social life was restricted to 16.39±3.97. A statistically significant difference was found between I-QOL total score means of women and urinary incontinence, mixed urinary incontinence, duration and frequency of urinary incontinence, educational status, BMI, income status, menopausal status, HRT use, long-term drug use, long-term constipation, cough, family history of incontinence or prolapse, presence of surgery related to gynecological diseases, sexual intercourse status and frequency, delivery status, the number of deliveries and tea drinking status. Urinary incontinence is a serious health problem that is common but not much appreciated by patients and causes deterioration in the quality of life of women. In order to reduce this common problem, the factors affecting urinary incontinence should be closely monitored and necessary counseling training should be done.

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