Incontinence, a neglected problem: How can we get better? A systematic nursing approach

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Introduction & Objectives

Urinary and fecal incontinence are highly prevalent, impair patient’s health related quality of life and cause a relevant economic burden. Though, about half of the affected patients do not seek professional help whereby misinterpretation of symptoms, misbelieves in successful treatments and shame are common reasons. A hospital stay may be an opportunity to identify incontinence and offer appropriate information about possible management. Therefore, our aim was to evaluate the current model of care and to assess the prevalence of incontinence to determine a baseline for improvements.

Methods and Results

Introduction & Objectives

Interviews with care providers

Analysis: relevant results from interviews

Teaching nurses

Assess prevalence

Main problems

• Difficult subject to address
• Neglected by patients
• Lack of knowledge about interventions

Resulting actions

• Quality improvement by pooling knowledge over departments and disciplines
• Specific teaching for nurses
• Prevalence assessment

Prevalence data

n=446 (207 female, 239 male), mean age 65 years

Prevalence of incontinence

<table>
<thead>
<tr>
<th>Category</th>
<th>Count (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urinary</td>
<td>99/446 (22%)</td>
</tr>
<tr>
<td>Fecal</td>
<td>47/446 (11%)</td>
</tr>
<tr>
<td>Mixed</td>
<td>28/446 (7%)</td>
</tr>
</tbody>
</table>

No significant difference between gender (P>0.05)

Self-estimated impairment in quality of life

<table>
<thead>
<tr>
<th>Impairment Level</th>
<th>Count (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No impairment</td>
<td>50/146 (34%)</td>
</tr>
<tr>
<td>Light</td>
<td>32/146 (22%)</td>
</tr>
<tr>
<td>Moderate</td>
<td>12/146 (8%)</td>
</tr>
<tr>
<td>Strong</td>
<td>24/146 (16%)</td>
</tr>
</tbody>
</table>

Qualitative results

Prevalence data

Mixed data

Analysis

Quantitative data

Development care model

Act

Conclusions

Incontinence was highly prevalent and the results comparable with similar hospitals in other developed countries. Specific training and a systematic approach enhance the competence and awareness of health professionals and enable patients to find help. Therefore, we emphasise that a hospital stay is an opportunity to systematically identify incontinent patients and offer appropriate information by an interprofessional health care team about this relevant but often neglected burden.

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The authors have nothing to disclose