Evidence based treatment of urinary incontinence

*Swedish Council on Technology Assessment in Health Care (SBU)*

**Record Status**
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

**Citation**

**Authors' objectives**
This report presents an assessment of methods used to treat the most common types of urinary incontinence in adults. The report addresses the prevalence of urinary incontinence in relation to age and gender, the methods used to diagnose incontinence, the cost-effectiveness of treatment, and issues related to education and the organization of services.

**Authors' conclusions**
Urinary incontinence is a major health problem. In Sweden, half a million people suffer from urinary incontinence at least once per week, but only slightly over half of them seek treatment. It is essential to study the extent to which the public is knowledgeable about accessibility to treatment methods and opportunities to receive help. Furthermore, it is essential that information on urinary incontinence is designed to reach the public at large.

Urinary incontinence can be treated via a range of medical interventions, eg, various training programs, drugs, surgery, and medical devices such as incontinence pads. Many methods show positive results, but the effects of different treatment methods are poorly studied. The same applies to preventive interventions such as training during and following pregnancy, and physical exercise for the elderly. There are few studies comparing the various treatment methods. It would be desirable to allocate more resources to research and assessment.

Receiving help or treatment for urinary incontinence is of major importance for the quality of life among those affected. Attention should be given to patients' perceptions on how incontinence influences their quality of life. Hence, it is important to develop questionnaires for practical clinical use which can measure and assess the quality of life.

Urinary incontinence is a hidden problem, and the number being treated via different medical interventions is unknown. Urinary incontinence should be registered as a separate diagnosis in health statistics so that the actual scope of the problem can be identified and trends can be monitored.

Primary care plays a key role in the care of the urinary incontinence. New types of organizations have developed, eg, special continence clinics and specially designated staff. To offer everyone with incontinence appropriate care, it is essential to identify the resources and organizational structures available within different catchment areas.

Primary care services are responsible for the basic treatment of urinary incontinence. It is essential to disseminate and implement evidence-based clinical practice guidelines more widely, and to commit greater resources toward training methods and other forms of treatment that can be offered in primary care.

Elderly with disorders such as dementia are often incapable of determining whether the health services are adequately caring for their incontinence problems. It is important for the staff to notice problems and discuss opportunities for treatment with patients and relatives. It is important for care providers to develop information and continuing education programs on urinary incontinence to complement the information from manufacturers.

Expenditures for medical devices and costs related to the care of the elderly comprise the greatest share of the cost for urinary incontinence. It is essential, both from humanitarian and economic considerations, to conduct assessment studies which can identify whether active treatment is better for patients and more cost effective for health care than...
passive interventions such as routine use of incontinence pads.

Project page URL
http://www.sbu.se/Published

INAHTA brief and checklist

Indexing Status
Subject indexing assigned by CRD

MeSH
Costs and Cost Analysis; Urinary Incontinence

Language Published
Swedish

Country of organisation
Sweden

English Summary
English summary available

Address for correspondence
P.O. Box 3657, SE-103 59 Stockholm, Sweden. Tel: +46 8 4123200, Fax: +46 8 4113260 Email: info@sbu.se

AccessionNumber
32001000021

Date bibliographic record published
02/03/2001

Date abstract record published
02/03/2001