

PELVIC FLOOR REHABILITATION IN URINARY INCONTINENCE - ANALYSIS OF THE FIRST YEAR OF TREATMENTS IN A HOSPITAL IN THE NORTH OF PORTUGAL

Mariana Xavier, Sofia Gaião Silva, Carolina Pereira e Carvalho, André Pereira, Josiana Carvalhosa, Inês Santos Jorge

Unidade Local de Saúde do Alto Minho, Portugal
e-mail: mxav94@hotmail.com

Background and Aims

Urinary incontinence (UI) is one of the main conditions addressed in pelvic floor rehabilitation (PFR) consultations. The most common types are stress, urge and mixed UI. It mostly affects women. The risk factors identified include multiparity and menopause in women; prostate surgery in men; and neurological disease, obesity, and advanced age in both sexes. Treatment may be conservative or surgical. PFR can be considered a first-line treatment for various types of UI, having been shown to reduce symptoms and improve patients' quality of life. Aims of this work: 1) to characterize the patients treated for UI during the first year of functioning of the Pelvic Floor Unit (PFU) of the Physical and Rehabilitation Medicine Department (PRMD) of a hospital in the North of Portugal; 2) to evaluate the clinical outcomes achieved through the implemented PFR programs.

Methods

Retrospective study conducted between October 2023 and October 2024. Instruments used: anal elevator test (Modified Oxford Scale), ICIQ-SF, UDI-6, OABSS. Patients' perceived improvement with treatment was also assessed.

Results

In total, 18 patients were treated, the majority women (94.4%). The types of UI treated were mixed and stress UI (55.6% and 44.4%, respectively). The main reported triggering factor for UI was childbirth (44.4%). As for the treatments implemented, all patients received instruction on home-based exercises and counseling on lifestyle modifications, with the majority (88.9%) reporting regular adherence to the exercise plan. All rehabilitation programs included pelvic floor kinesiotherapy and BFB. Endocavitary electrotherapy was used in 66.7% of patients, and transcutaneous tibial nerve stimulation in 61.1%. Overall improvement was observed across all evaluated parameters.

Conclusion

The PFR programs used at the PFU showed positive clinical outcomes in most cases of UI, during the first year of activity. The acquisition of additional therapeutic modalities by the Department may provide further benefit to patients with UI and other conditions.

Keywords: Incontinence, Rehabilitation