

Coping Strategies & Self Measures adopted by the Women with Urinary Incontinence & its Effects on QOL

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Vidya Seshan

Department of Maternal and Child Health, Sultan Qaboos University, Oman

Correspondence: Vidya Seshan, Assistant Professor, Department of Maternal and Child Health, College of Nursing, Sultan Qaboos University, Sultanate of Oman, Oman, Tel 00968-96739695 Email vidya69@squ.edu.om

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Opinion

Urinary incontinence (UI) is a silent condition where women feel shyness to consult with anyone or health care providers. When we refer to the statistical figure of prevalence of UI globally, it ranges from 20% to 68%.¹ Even though the global statistics indicate the high prevalence, but still women are not willing to come forward to express their concern on UI and they maintain as confidential and hence suffer silently.

Understanding how women adapt to situations is very imperative as a base to build up an educational program. 202 women with UI were studied to understand the coping strategy & self-measures adopted by them to manage UI. A cross-sectional descriptive study design, using convenient sampling technique was used to find self-measures and coping strategy adopted by community dwelling women with UI in South India. The proposal was ethically approved and Informed consent was taken from the participants once they agree to participate in the study. Coping strategies and self-measures were identified with the help of a tool, and the result were concluded using descriptive statistics.

The result shows that the majority of the women surveyed restricted their fluid intake (43%), others frequently visited the toilet to empty their bladder (45%), some of them used pads or cloths (10%) to avoid wetting their garments with urine and majority of them restricted their outgoing and social gathering (66%) and few of the women were taking self medication (5%) as a coping strategy and self measures to manage with UI. Self-measures that the woman has adopted have had an effect on their physical, social, psychological and economic well-being. These measures had an effect on their QOL in general physical health, emotional health, social functioning, and sexual health.

Restrictions on their outgoing and social gathering, this is one of the strategies used by the incontinent women which moves them for a long time into seclusion from social activities. Because of the fear of being in a state of urinary urgency and the danger of finding themselves incontinent in public, stop doing activities that gave them pleasure.² However, on a long run this makes the women separated from the society and diminishes her QOL.

Using pads and cloths are also one of the strategies adopted by women to prevent them from wetting. But studies have proved that these measures will make the women unpleasant. Urinating on clothes and pads is interpreted as a behavior not expected from adults. Here the woman compromises the QOL for the condition they have and this has an impact on the physical and social dimensions. Living with UI with no perspective of achieving rehabilitation leads one to modify behaviors in order to adapt to the inconvenience of urine leakage, using strategies that most often makes women susceptible to other physical, psychological and social complications.²

This study proved that 90% of the women have lack of awareness on UI and treatment modalities, which contributes for their practice of self-management and degrading quality of life (QOL). The health care professionals have to take more care and attention by disseminating Knowledge on UI, diagnosing and providing proper management and care is very essential, as the women feel shy to consult with the health care providers and end up with adopting self-management. Early identification and educational program can curtail the self-management and improve the QOL of women with UI.^{3,4}

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None.

Conflicts of interest

None.

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