

ABSTRACT

Prevalence of Self-reported Urinary Incontinence in the Community Dwelling Elderly Population of Westmoreland, Jamaica

Otaniyenuwa Asemota

Urinary incontinence (UI) is defined as involuntary leakage of urine¹. It is a disorder whose prevalence increases with age, earning it a place as one of the geriatric giants²⁻⁵. Although it reportedly causes considerable distress and morbidity especially in the elderly, its true local prevalence remains unknown and it has been proposed that many of those who are affected do not report the condition to their healthcare provider²⁻³.

A universal screening tool has been developed to assist primary healthcare professionals in identifying cases of UI among the elderly and in implementing appropriate management protocols when indicated⁴⁻⁵. However, the magnitude of the urinary incontinence burden in our local environment is not clearly known due to the paucity of published local data on this subject, both in Jamaica and the wider Caribbean. It is postulated that physician willingness to apply the toolkit may be influenced by knowledge of the burden of UI in their communities. Physicians may also need to know that unreported cases constitute a significant proportion of this burden.

This research project is a cross-sectional study which is aimed at determining the prevalence of urinary incontinence in the elderly population of Westmoreland Jamaica. It also aims to determine the proportion of affected elderly individuals who have failed to report UI symptoms to their physicians.

The study was conducted over a three-week period in twelve community clusters in the parish of Westmoreland, Jamaica. Data was gathered from eligible elderly persons in those communities using an interviewer-administered questionnaire specifically developed for this project. Analysis of raw data was done using the Statistical Package for the Social Sciences SPSS version 17.

The results indicate a one year prevalence of urinary incontinence of 10.6% in the surveyed population, with approximately 30% of respondents who have UI having failed to report the condition to their doctor.

All persons who were interviewed for this study were verbally informed of the voluntary nature of study participation. Informed and signed consent was obtained in all cases. Approval for this study was obtained from the UWHI/UWI/FMS Ethics Committee, the Advisory Panel on Ethics and Medico-legal Affairs at the Ministry of Health Jamaica and the Western Regional Health Authority.

ACKNOWLEDGEMENT

I wish to acknowledge my course coordinator Dr. Aileen Standard Goldson for her tireless dedication to all her residents. This work is for me, the culmination of a Family Medicine Residency Program that was skillfully and competently managed by her.

I also wish to gratefully acknowledge the support and technical guidance given to me by my research supervisor Professor Denise Eldemire Shearer. It was her teaching on Geriatric Medicine that inspired this research topic at the outset.

Lastly, but not in any way least, I wish profoundly to acknowledge Drs. Norman Waldron and Kenneth James for their meticulous teaching of Research Methodology and Biostatistics, the core modules that provided for me the foundation of medical research upon which this work has been based.