



Maternal health And Maternal Morbidity in Ireland

Urinary Incontinence (UI) before and during early pregnancy Findings from the MAMMI study UI strand

30th Triennial Congress, ICM Prague 2014 Midwives: Improving Women's Health Globally

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Sincerest thanks to

- The women (all women including those who are not taking part but who read the information)
- My colleagues Margaret Carroll, Deirdre O'Malley, Francesca Wuytack, Sunita Panda, Jamile Marchi, Louise Rafferty

- The Health Research Board (HRB) for funding the MAMMI study UI strand
- Professor Stephanie Brown, Murdoch Children's Research Institute,
 Australia for granting permission to use and modify surveys







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A special thanks to

The midwives and midwifery students

- The IT Midwives

The medical records staff

Administrative and other colleagues who are supporting the MAMMI study













Maternal health And Maternal Morbidity in Ireland

This presentation will focus on

UI in primiparous women before and during early pregnancy (Data from women enrolled up to April 2014, n=1215)

- (i) Background to the MAMMI study
- (ii) Prevalence of UI before and during early pregnancy
- (iii) Factors associated with UI
- (iv) Help and advice-seeking behaviour of women

Conclude with key message

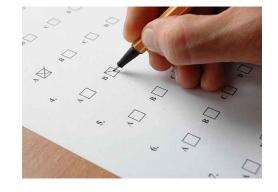




Mixed methods design The MAMMI Study



A cohort study with 2,000 first-time mothers: public, private, semi-private – survey.



Women are recruited at the booking visit in two large maternity hospitals



(1600 from 1st site,



400 from 2nd site)



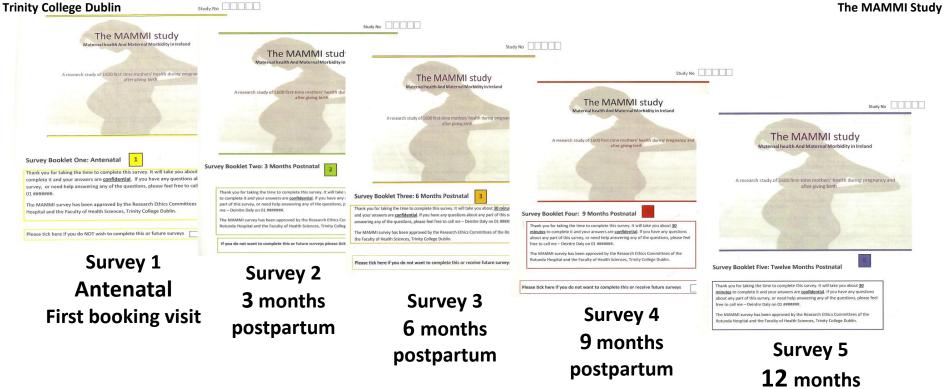
(**600** from 3rd site commencing 09/2014)



Mixed methods design



postpartum





Mixed methods design

The MAMMI study

after giving birth

Study No

Study No

Survey Booklet Three: 6 Months Postnatal

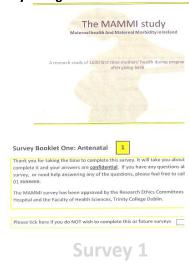
the Faculty of Health Sciences, Trinity College Dublin





Study No





Antenatal First booking visit

Survey Booklet Two: 3 Months Postnatal to complete it and your answers are confidential. If you have any part of this survey, or need help answering any of the questions, p me - Deirdre Daly on 01 ######. totunda Hospital and the Faculty of Health Sciences, Trinity Colleg If you do not want to complete this or future surveys please tick Survey 2 3 months postpartum

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Survey 3 6 months postpartum

The MAMMI study A research study of 1600 first-time mothers' health during pregnancy and Survey Booklet Four: 9 Months Postnatal and your answers are confidential. If you have any questions about any part of this sa swering any of the questions, please feel free to call me - Deirdre Daly on 01 #### The MANAMI curvey has been approved by the Research Ethics Committees of the Ro minutes to complete it and your answers are confidential. If you have any question ut any part of this survey, or need help answering any of the questions, please fee free to call me - Deirdre Daly on D1 ####### The MAMMI survey has been approved by the Research Ethics Committees of the tunda Hospital and the Faculty of Health Sciences, Trinity College Dublic Please tick here if you do not want to complete this or receive future survey. Please tick here if you do not want to complete this or receive future surveys Survey 4 9 months

Study No

postpartun

Identify factors amenable to modification and trialling in future studies

The MAMMI study

Maternal health And Maternal Morbidity in Ireland

A research study of 1600 first-time mothers' health during pregnancy and

Survey Booklet Five: Twelve Months Postnatal

minutes to complete it and your answers are confidential. If you

after giving birth

Data collection from women's records



Interviews with women experiencing a morbidity



To ascertain health service and self-help seeking behaviour



The MAMMI Study



Mental

health

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The MAMMI study Study No Study No The MAMMI study The MAMMI study Survey 1 Survey 2 **Antenatal** 3 months First booking Survey 3 postpartum Survey 4 visit 6 months 9 months postpartum Survey 5 postpartum

Intimate partner violence

Sexual health

12 months postpartum

2000 primiparous women

General

health

(A/N, 3, 6, 9 and 12 months postpartum)

Data collection from women's records

One-to-one interviews with women experiencing a morbidity

(n=20-30)

Faecal incontinence

Urinary incontinence (UI)

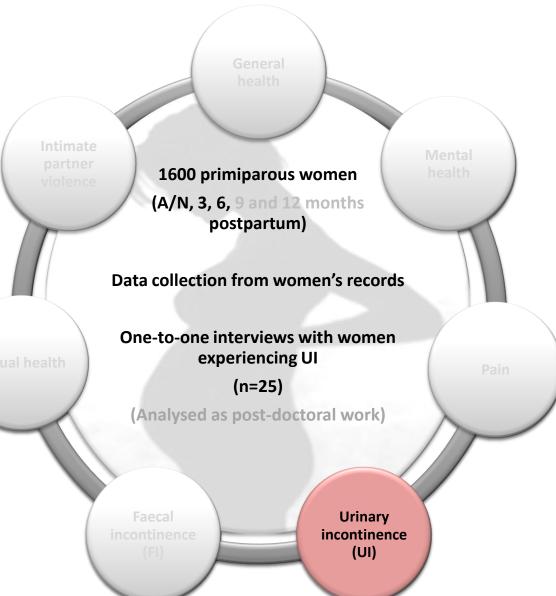
Pain





Aim:

To identify the existence, extent, prevalence and associated risk factors for urinary incontinence (UI), one marker of maternal morbidity, in 1600 primiparous women antenatally and at 3 and 6 months postpartum.





Definition - Urinary Incontinence (UI)

- The complaint of any involuntary leakage of urine
 - Stress Urinary Incontinence (SUI)
 - Involuntary leakage on effort or exertion, or on sneezing or coughing.
 - Urge Urinary Incontinence (UUI)
 - Involuntary leakage accompanied by or immediately preceded by urgency.
 - Mixed Urinary Incontinence (MUI)
 - Involuntary leakage associated with urgency and also with exertion, effort, sneezing or coughing.

Definitions

Abrams et al (2002) 2nd International Consultation on Incontinence 2nd edition.

Available at: http://www.ics.org/Publications/ICI-4/book.pdf





The MAMMI study



Preliminary data

- ~40% of primiparous women in the 1st site hospital are being offered information on the MAMMI study
- Of those given the information, just under two in five women complete the survey
- Response rate (~37%)



Nationality (n=1215)



Nationality	The MAMMI Study		Site hospital 2012 (n = 9116) (all women)	
	n	%	n	%
Irish	784	64.5%	5957	65.4%
EU	312	25.7%	1929	21.2%
Non-EU	98	8.1%	1217	13.3%
Not stated	21	1.7%	13	0.1%



Age groups (n=1214)



Age group	The MAMMI Study		Site hospital 2012 (n=3928) (primiparae)	
	n	%	n	%
18 to 24 years	104	8.6	872	22.2
25 to 29 years	297	24.5	1031	26.2
30 to 34 years	502	41.3	1307	33.3
35 to 39 years	268	22.1	577	14.7
40 years and over	42	3.5	141	3.6



BMI categories (n=1114)



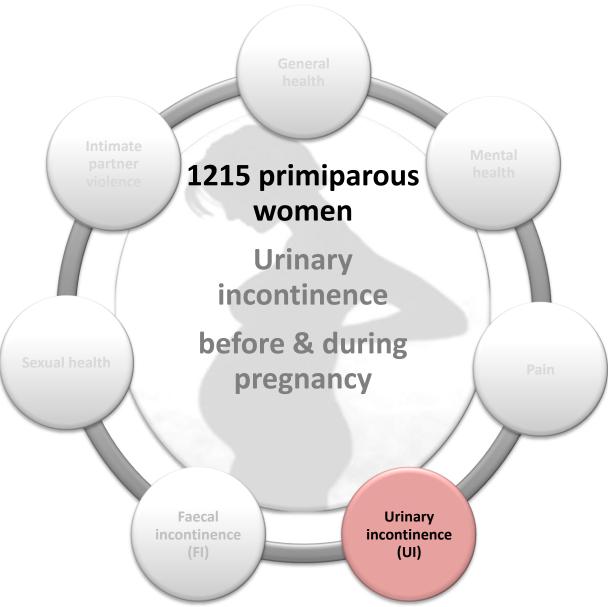
BMI categories	т	he MAMM	I Study	Site ho	ospital
BMI (Kg/M²)		n	%	n	%
Underweight (≤18.	49)	68	6.1		
Ideal (18.5-24.9)		746	67.0		
Overweight (25-29.9)		193	17.3	Not reported	
Obese (30-34.9)		88	7.9		
Very obese (≥35)	19	1.7		
Total		1114	100.0		
Calculated from women's se	If-report weight	G	pre-pregnancy		





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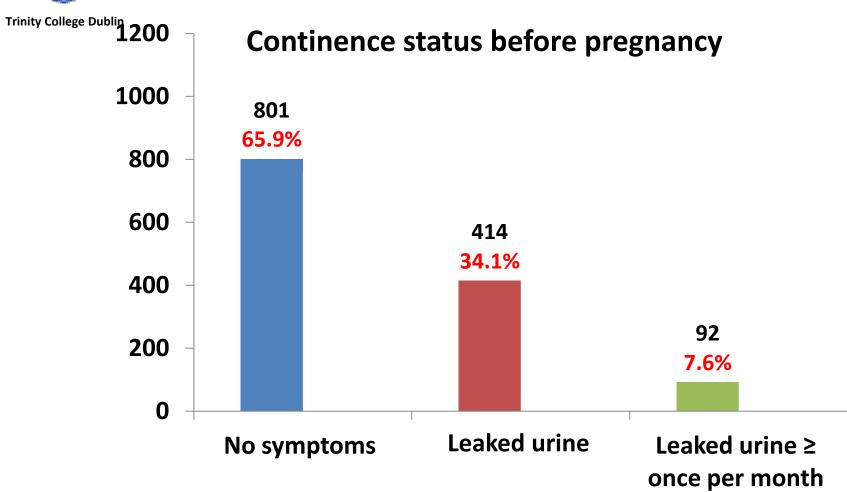
(ii) Prevalence of urinary incontinence before & during pregnancy







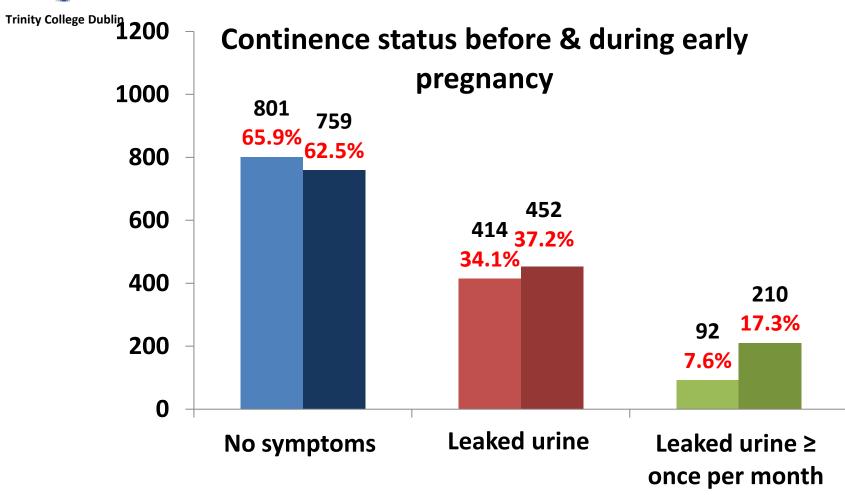
Continence status







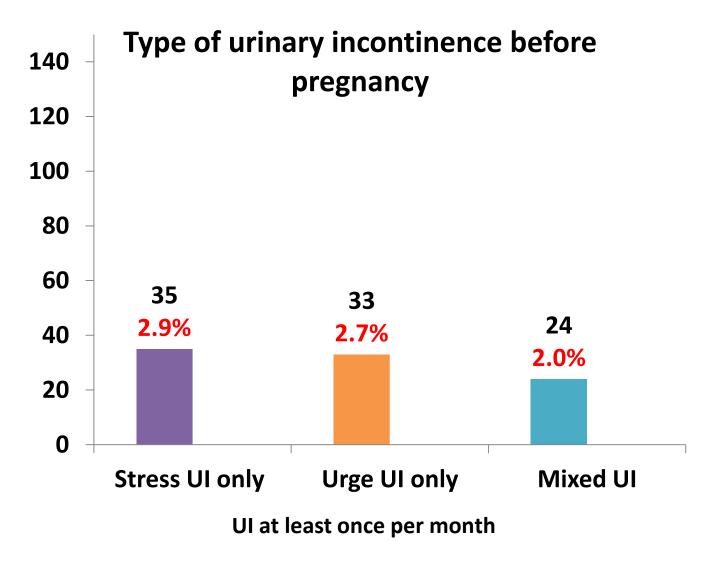
Continence status







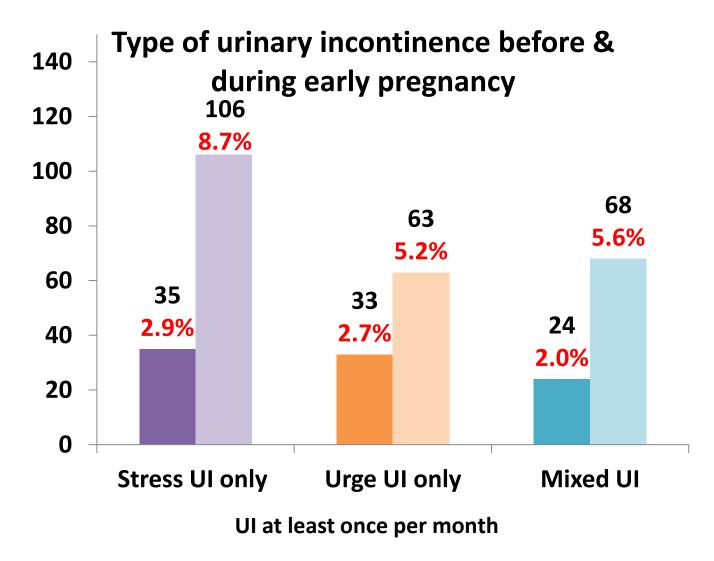
Type of urinary incontinence







Type of urinary incontinence

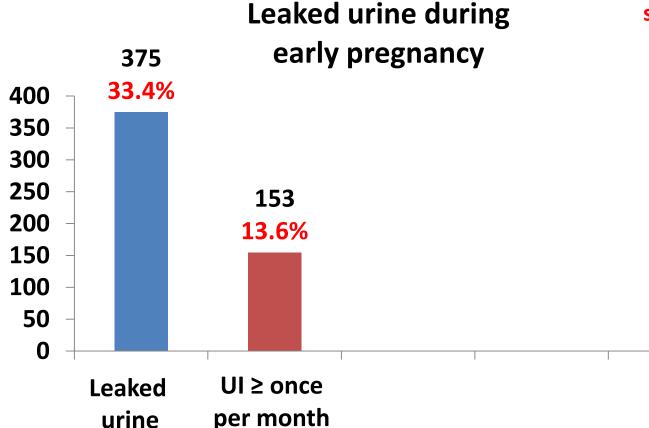








Women who reported no symptoms or who leaked urine less than once per month

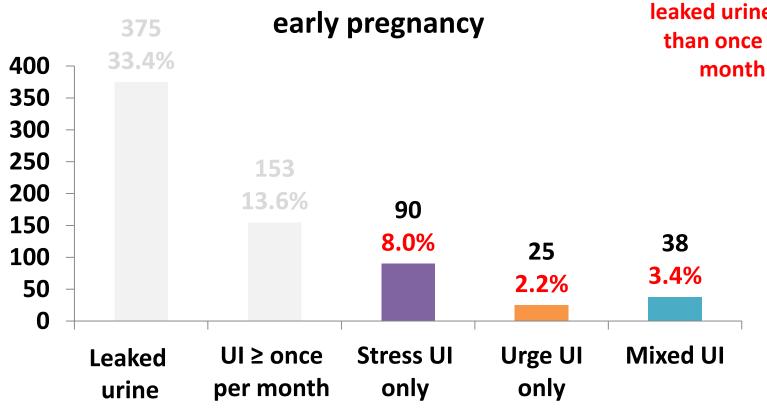








Women who reported no symptoms or who leaked urine less than once per



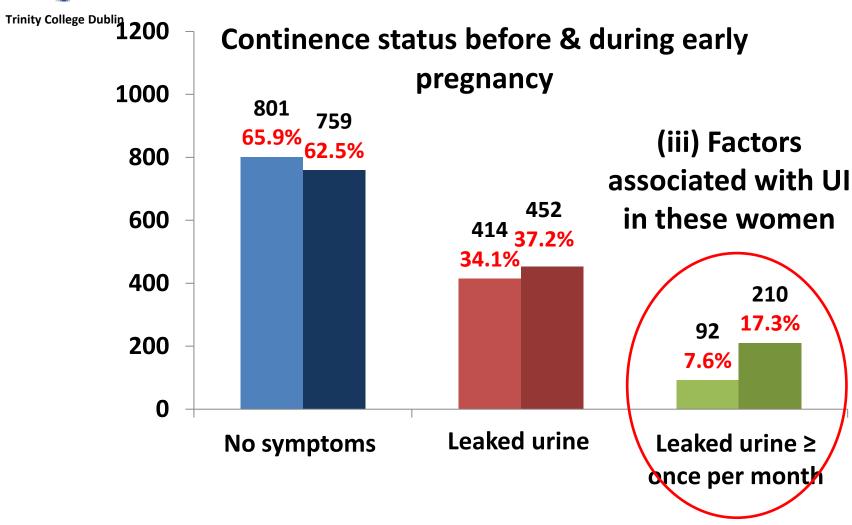
Leaked urine during

UI at least once per month





Continence status









Variables	Reference category
Age categories (4 categories)	25-34 years
BMI categories (4 categories)	18.5-24.9 (kg/M²)
Childhood enuresis	No
Anxiety before pregnancy	No
Depression before pregnancy	No
History of urinary tract infection	No





Factors associated with urinary
incontinence before pregnancy

	12 montr	ns before
Leaked urine at least once per	pregr	nancy
month	92	7.6%

Variable	<i>p</i> -value	Unadjusted odds ratio	95% CI
Age ≥40 years	0.042	2.4	1.03-5.68
BMI ≥30kg/M²	0.006	2.5	1.3-4.86
Childhood enuresis	<0.005	3.2	2.03-4.93

There was no significant association with other factors assessed





Factors associated with new urinary incontinence during early pregnancy

Leaked	urine	at	least	once	per
	m	or	nth		

New urinary	incontinence
during earl	y pregnancy

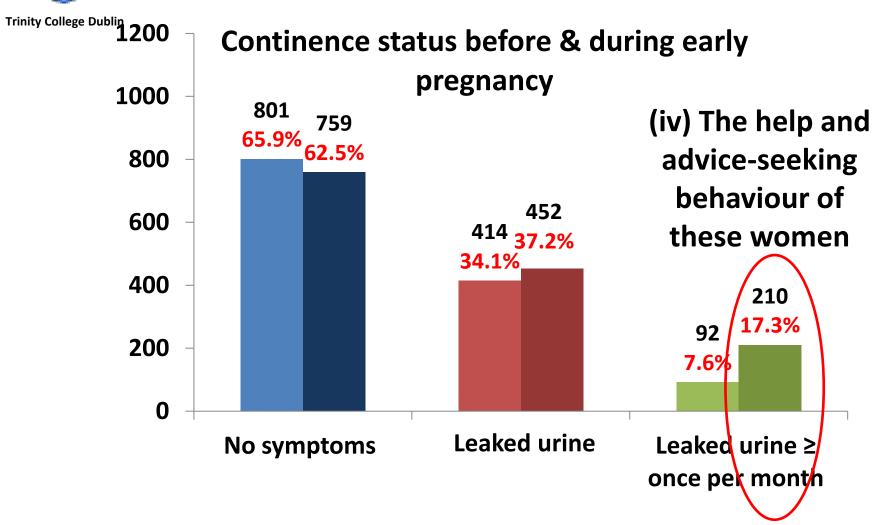
153 13.6%

Variable	<i>p</i> -value	Unadjusted odds ratio	95% CI
Age 35-39 years	0.002	1.88	1.27-2.79
Age ≥40 years	0.003	3.20	1.49-6.98
BMI ≥25kg/M²	0.022	1.66	1.07-2.57
Leaked urine <once before="" month="" per="" pregnancy<="" td=""><td><0.005</td><td>2.46</td><td>1.74-3.49</td></once>	<0.005	2.46	1.74-3.49





Continence status





Managing urinary incontinence in early pregnancy



Which of the following best describes how you manage this	n=197/210	
	n	%
Minor problem – I ignore it	75	35.7
Carry a change of underwear and change whenever I need	11	5.2
Wear protection whenever I need to	39	18.6
Know where the nearest toilet is all the time	17	8.1
Wear protection all the time	46	21.9
Other	9	4.3





Help and advice-seeking behaviour

nity College Dublin	During early pregnancy			
	n = 1214	%	or (
Yes	210	17.3%	-	

The help and advice-seeking behaviour women with UI at least once per month during pregnancy

Have you talked to a doctor, midwife or other healthcare professional?

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Aresearch study of 1600 first-time mothers' health during pregnancy and after giving birth.

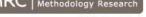
Survey 1
Antenatal
First booking visit

Thank you for taking the time to complete this survey. It will take you about 30 minutes to complete it and your answers are <u>conflectual</u>. If you when any questions about any part of this survey, or need help answering any of the questions, please feel free to call me — Deirdre Daly on

The MAMMI survey has been approved by the Research Ethics Committees of the Rotunda

Hospital and the Faculty of Health Sciences, Trinity College Dublin.

Survey Booklet One: Antenatal





Methodology Research All-Ireland Hub

Help and advice-seeking behaviour

Trinity College Dublin

_	<u> </u>	-		-
		During early pregnancy		Have you talked a doctor, midw
		n = 1214	%	or other healthoughter professional
	Yes	210	17.3%	15.2% (n=32
				 Doctor (hospital) (

The help and advice-seeking behaviour women with UI at least once per month during pregnancy

d to vife care

- GP (n=9)
- Midwife (n=10)
- Other (n=6)

What women said about urinary incontinence during early pregnancy

Women who reported leaking urine at least once per month (n=210)

Recurring themes from 123 qualitative comments



What women said about urinary incontinence during early pregnancy

Women who reported leaking urine at least once per month (n=210)

It's not a problem (28)

It's part of pregnancy (21)

It's minor (11)

Recurring themes from 123 qualitative comments

It's not a major problem (19)

It's not important (8)

It's not a concern (6)

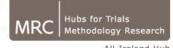
It's not serious (4)

I will talk about it now (3)









 Women reporting occasional UI before pregnancy have raised odds of developing UI during pregnancy

because...

- Brown et *al.* (2010)
- Women who develop UI during the first pregnancy or puerperium have a significantly higher risk of UI 5 years later than women without UI symptoms
 - Viktrup & Lose (2000)





This is relevant because...

- Opportunities for continence promotion during early pregnancy are being lost
 - Whilst UI remain undisclosed and not discussed women who could become continent will continue to be incontinent
 - Women reporting occasional UI before pregnancy have raised odds of developing UI during pregnancy
 - Brown et al 2010
 - Women who develop UI during the first pregnancy or puerperium have a significantly higher risk of UI 5 years later than women without UI symptoms
 - Viktrup & Lose 2000





Conclusion and key message

Urinary incontinence is common but it not normal and can be treated

Women who have urinary incontinence <u>can</u> become continent

...but the process must start with discussion and enabling disclosure





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Thank you

Thanks to the scientific committee for the opportunity to present

http://www.mammi.ie/



References and recommended reading

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Future work

- The MAMMI study is ongoing
 - Sample size is 2,600 over three hospital sites
 (3rd site commencing in September 2014 Research Ethics Committee approval granted)
- Detailed analyses are required before the complexities of urinary incontinence are truly understood and all significant associations are ascertained
 - Only then can modifiable factors be identified

http://www.mammi.ie/

