

The MAMMI Study

Maternal health And Maternal Morbidity in Ireland

Faecal and Urinary incontinence before and during pregnancy

4th International Nursing and Midwifery Conference 15th April 2013, NUI Galway

Déirdre Daly

Lecturer in Midwifery/HRB Research Fellow, Trinity College Dublin

Supervisors:

Professor Cecily Begley, TCD and Professor Mike Clarke, QUB (Adjunct Professor TCD)



The MAMMI Study (UI strand)

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The MAMMI Study (UI Strand) | IRB



Sincerest thanks to

- The women (all women including those who are not taking part but who read the information)
- The midwives and midwifery students and other colleagues who are supporting the MAMMI study
- My supervisors Professor Cecily Begley and Professor Mike Clarke
- My colleagues Margaret Carroll, Deirdre O'Malley, Francesca Wuytack
- Rebekah Maguire and Sophie Clare who worked with us on the MAMMI study in summer 2012
- 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



The MAMMI Study

Maternal health And Maternal Morbidity in Ireland



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- Background and overview of study methodology
- Aim and objectives of MAMMI study and the embedded MAMMI study urinary incontinence (UI) strand
- Preliminary findings on urinary and faecal incontinence (from women recruited up to March 2013, n=725)
- Key points
- Future work



Conception, gestation and birth of the MAMMI Study









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The MAMMI Study

Searched 9-11th October 2009. Platform: Library, University of Dublin Trinity College

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The multiple meaning of maternal morbidities



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Searched 9-11th October 2009. Platform: Library, University of Dublin Trinity College

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The MAMMI Study



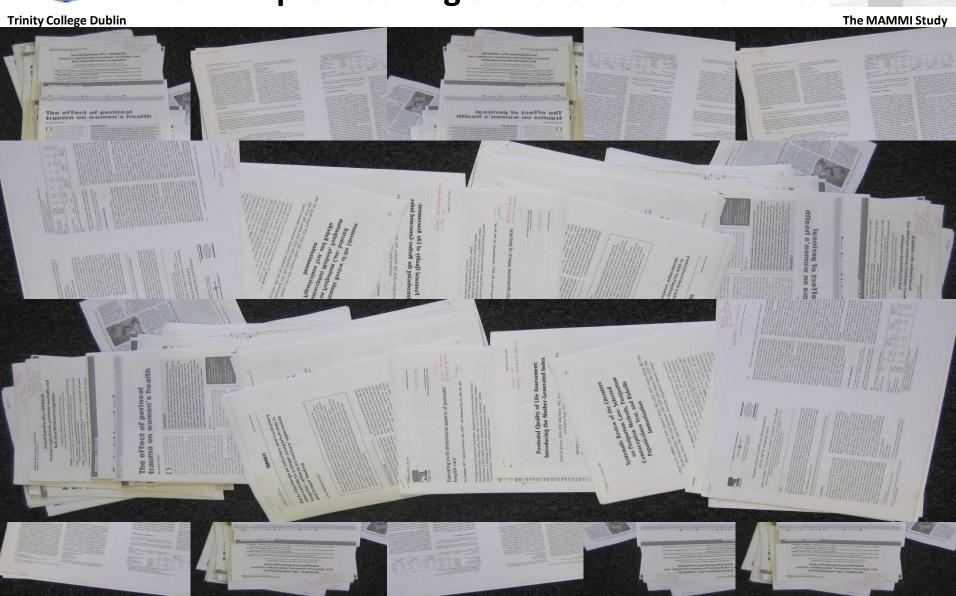


Default position





The multiple meaning of maternal morbidities





Background and context The MAMMI Study

Maternal health And Maternal Morbidity in Ireland

General health after childbirth

All women

Multiparous women v Primiparous women

Women with underlying medical conditions

Physical problems

Psychological problems

Specific conditions

Obstetric emergencies

Severe morbidity

General health problems

Headache, migraine

Musculoskeletal pain

Perineal pain

Urinary problems

Bowel problems

Sexual health problems

Depressive symptoms

Infection

Mastitis and breast problems





Background and context The MAMMI Study

More recent studies have shown

- The prevalence and enduring nature of many of these morbidities
- Their persistence or resolution over time
- The existence of co morbidities
- The inextricable link between maternal emotional wellbeing, depression and physical health recovery postpartum
- Morbidity can exist before pregnancy



The MAMMI Study



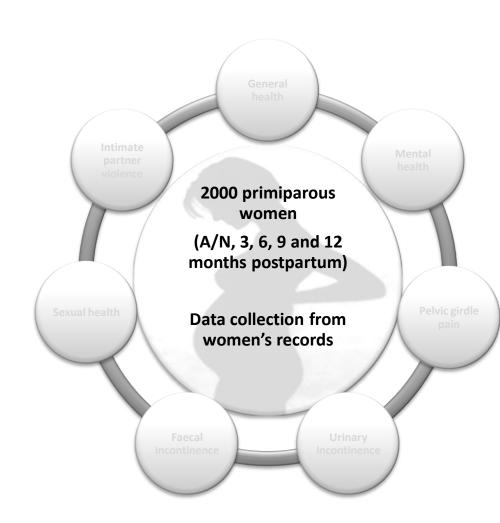
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Objective (i)

to identify prevalence of morbidities up to 12 months postpartum for women having their first baby

Objective (ii)

to identify associated factors e.g., age; Body Mass Index (BMI); mode of birth; birth weight





The MAMMI Study



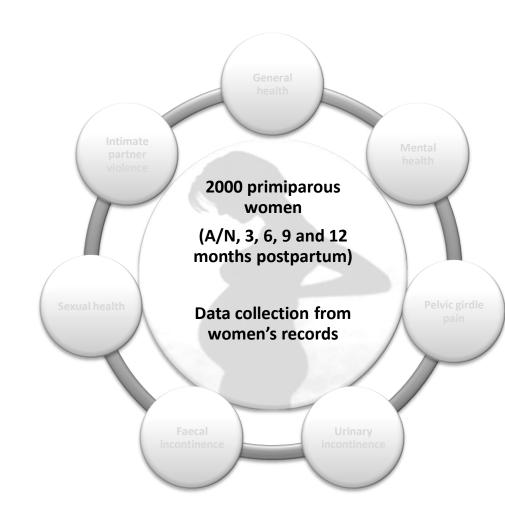
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Objective (iii)

to identify the health service-seeking and selfhelp behaviours of subsamples of women experiencing morbidities

Objective (iv)

to identify the risk factors for morbidities that may be amenable to intervention



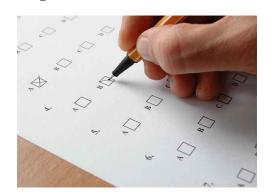


Mixed methods design The MAMMI Study



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







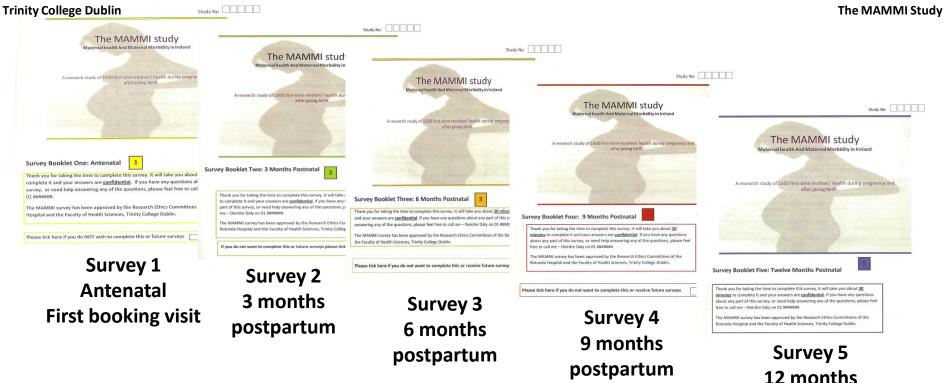




Mixed methods design



postpartum





Mixed methods design

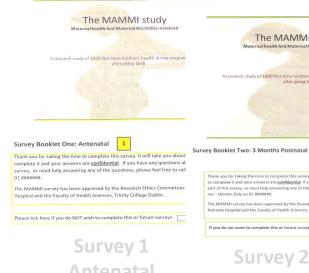
Study No

Study No



Trinity College Dublin Study No The MAMMI Study

Study No



Antenatal First booking visit

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 Colle, If you do not want to complete this or future surveys please ticl Survey 2 3 months postpartum

The MAMMI stud

A research study of 1600 first-time mothers' health dur

Survey Booklet Three: 6 Months Postnatal and your answers are confidential. If you have any questions about any part of this sa wering 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 the Faculty of Health Sciences, Trinity College Dublin Please tick here if you do not want to complete this or receive future survey. Survey 3 6 months postpartum

The MAMMI study

after giving birth

minutes to complete it and your answers are confidential. If you have any questi 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 unda Hospital and the Faculty of Health Sciences, Trinity College Dubli Please tick here if you do not want to complete this or receive future surveys Survey 4

Survey Booklet Four: 9 Months Postnatal

9 months postpartun

The MAMMI study

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

Study No

Data collection from women's records



Interviews with women experiencing a morbidity



To ascertain health service and self-help seeking behaviour

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



The MAMMI Study

postpartum

Each of the surveys asks women about...

The MAMMI study Study No Study No The MAMMI study The MAMMI study Sexual health Survey 1 Survey 2 Antenatal 3 months First booking Survey 3 postpartum Survey 4 visit 6 months 9 months postpartum Survey 5 postpartum 12 months

Intimate partner violence

General health

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Mental

health

2000 primiparous women (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)

Urinary incontinence

(UI)

Pain

Faecal incontinence



The MAMMI Study – UI Strand



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.

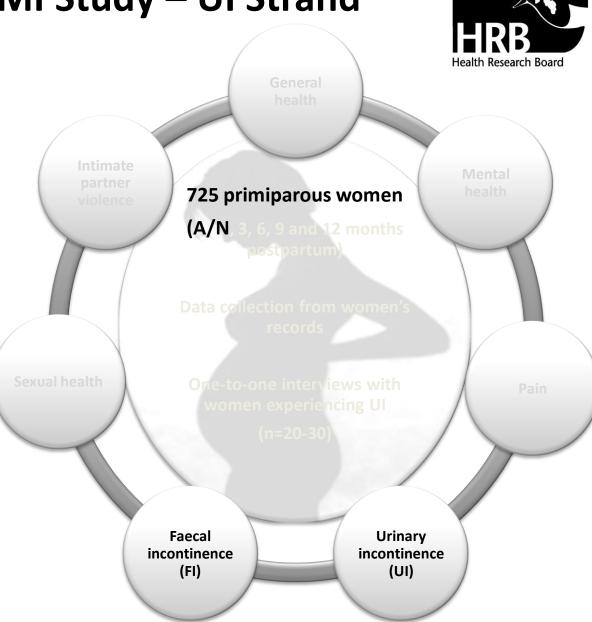
1600 primiparous women (A/N, 3, 6, 9 and 12 months postpartum) Data collection from women's records One-to-one interviews with women experiencing a morbidity (n=20-30)Urinary incontinence (UI)



The MAMMI Study – UI Strand

Today's presentation focuses on Objective (i)

The prevalence of UI (and FI) before and during early pregnancy





Urinary incontinence (UI)



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Author	N	Prevalence
Glazener et al (2006)	3405 (primiparae; singleton pregnancy)	29% UI at 3 months postpartum: 3% had daily or more frequent leakage; 3% needed to wear a pad for this
	N	Prevalence
Brown et al (2009)	1507 (nulliparae)	Prevalence of UI increased from 10.8% in the 12 months before the index pregnancy to 55.9% in the 3 rd trimester



Faecal incontinence and bowel problems



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		Pr	evalence at	t 17- 24 weeks postpartum			
Thompson et al (2002)	1295		Unassisted VB	Assisted VB	CS		
		Bowel problems	15%	22%	22%		
		Haemorrhoids	12%	19%	14%		
			Prevale	nce at 4-8	Prevalence at 1 year		
			weeks po	ostpartum	postpartum		
Schytt et al (2005)	2413	Haemorrhoids	24.6%		17.6%		
		Constipation	20.5%		10.6%		
		Anal incontinence	1.	.8%	1.5% (faeces inc.)		



The MAMMI Study (UI) strand

Faecal and Urinary incontinence before and during pregnancy

Definitions

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



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



Definition - Urinary Incontinence (UI)



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- 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.

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

Available at: http://www.ics.org/Publications/ICI_2/MENUS/MAIN.PDF





Definition - Faecal Incontinence (FI)



Functional status

- Need to wear tissues or pads in underwear
- Degree of soiling of tissues, pads or underwear
- Duration, frequency and timing of incontinence

Severity of faecal incontinence

- Minor if faecal seepage occurs less than once a month
- Moderate if there is incontinence of solids more than once a month or liquids more than once a week
- Severe if there is loss of control of solids several times a week or liquids on a daily basis



The MAMMI study



Preliminary data

- (~30%) of primiparous women are being offered information on the MAMMI study
- Of those given the information, about one in three complete the survey
- Response rate (~30%)



Demographic profile (n=725)



The MAMMI Study Nationality	The site hospital 2011 Nationality (All women)			
	N	%		
Irish	461	63.6%	5957	65.35%
EU	190	26%	1929	21.16%
Non-EU	64	8.8%	1217	13.35%
Not stated	10	1.4%	13	0.14%



Demographic profile (n=725)



The MAMMI Study Age groups	The site hospital 2011 Age groups (primiparous women)			
	N	%	N	%
Up to 24	62	8.6	976	23.5
25 to 29	166	22.9	1137	27.4
30 to 34	304	41.9	1314	31.7
35 to 39	162	22.3	581	14.0
40 and over	30	4.1	143 (4151)	3.5



Demographic profile (n=725)



The MAMMI Study	The site hospital			
BMI Categorie	BMI categories			
	N	%	N	%
Underweight (BMI <18.49)	50	6.9	Not available	
Ideal (18.5-24.9)	438	60.4		
Overweight (25-29.9)	113	15.6		
Obese (30-34.9)	53	7.3		
Very obese (35+)	12	1.7		
Total	666	91.9		
Missing	59	8.1		



Leaking urine before pregnancy (n=725)



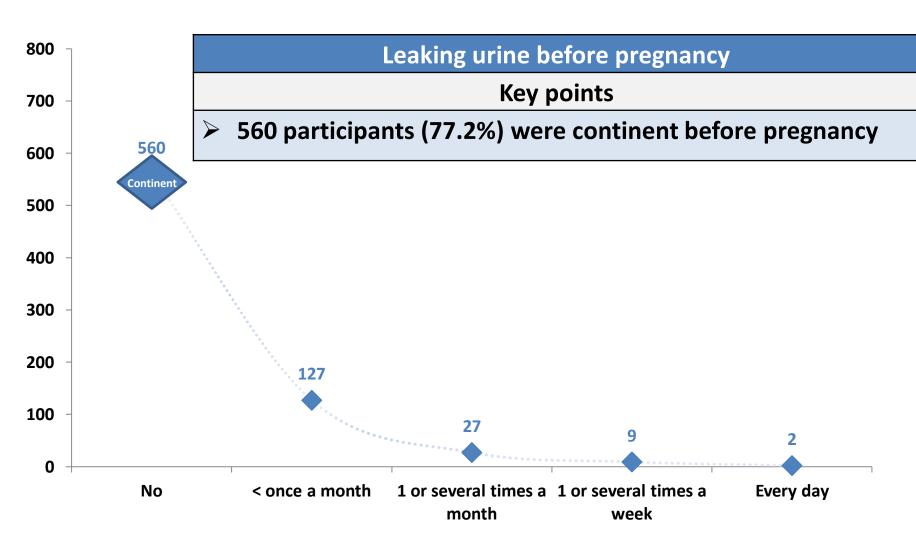
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During the 12 months before pregnancy, did you ever leak even a small amount of urine?



Leaking urine before pregnancy (n=725)



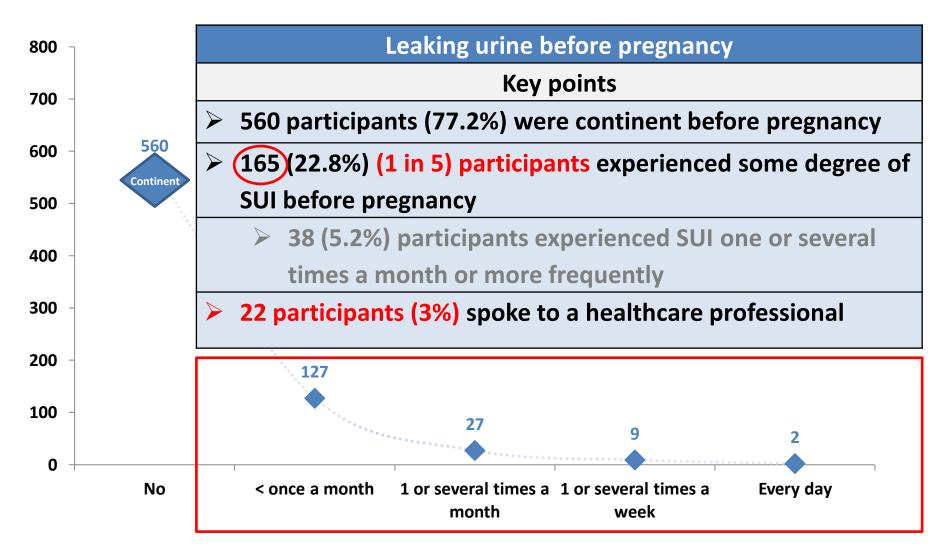




Leaking urine before pregnancy (n=725)



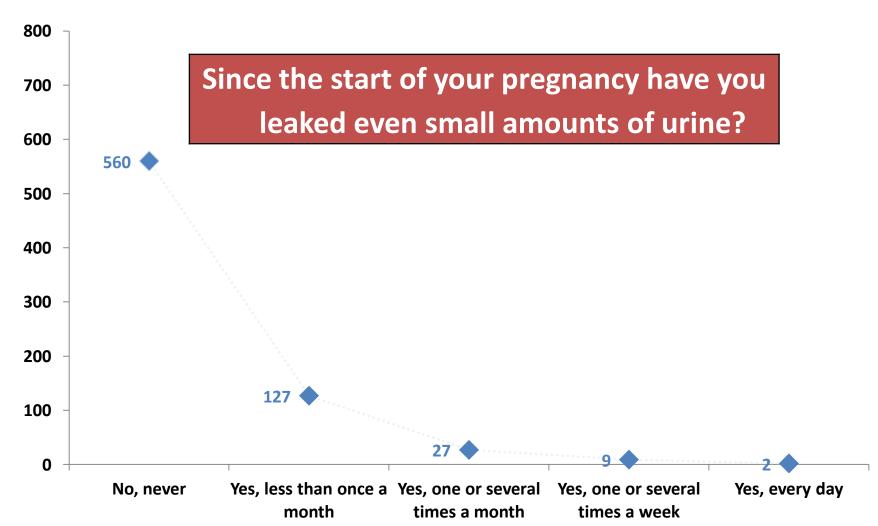
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Leaking urine before and during pregnancy



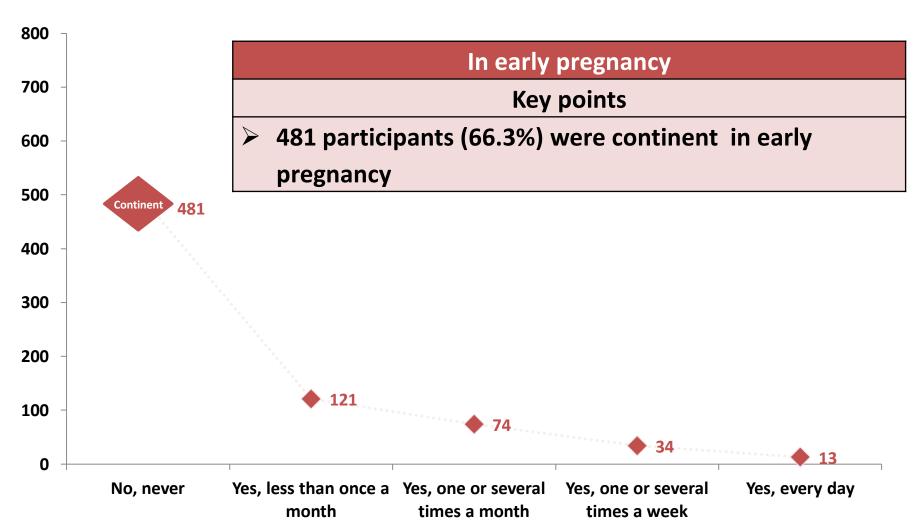




Leaking urine before and during pregnancy



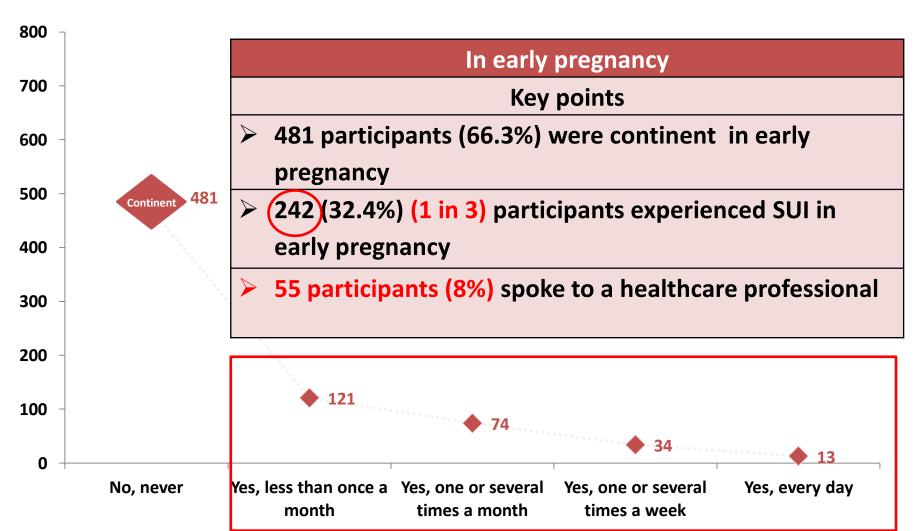
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Leaking urine before and during pregnancy



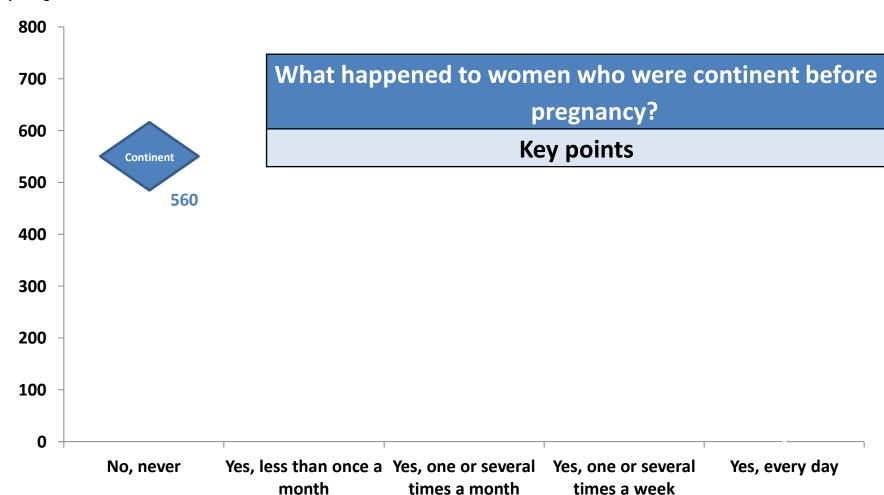




Women who were continent before pregnancy (n=560)



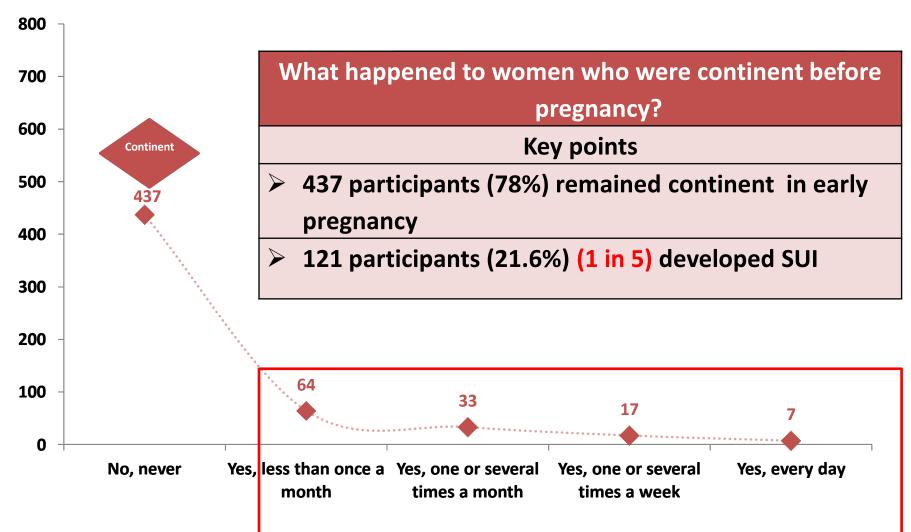
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Women who were continent before pregnancy (n=560)

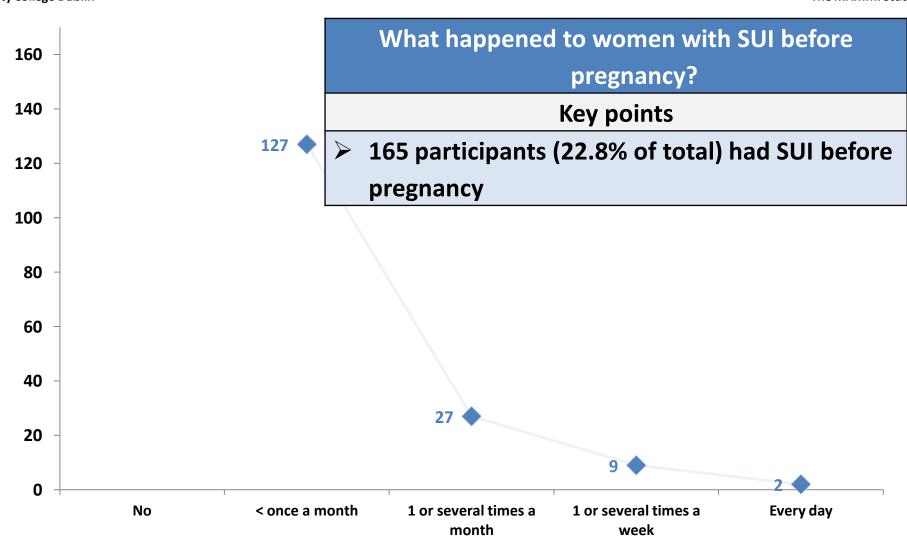






Women with SUI before pregnancy (n=165)

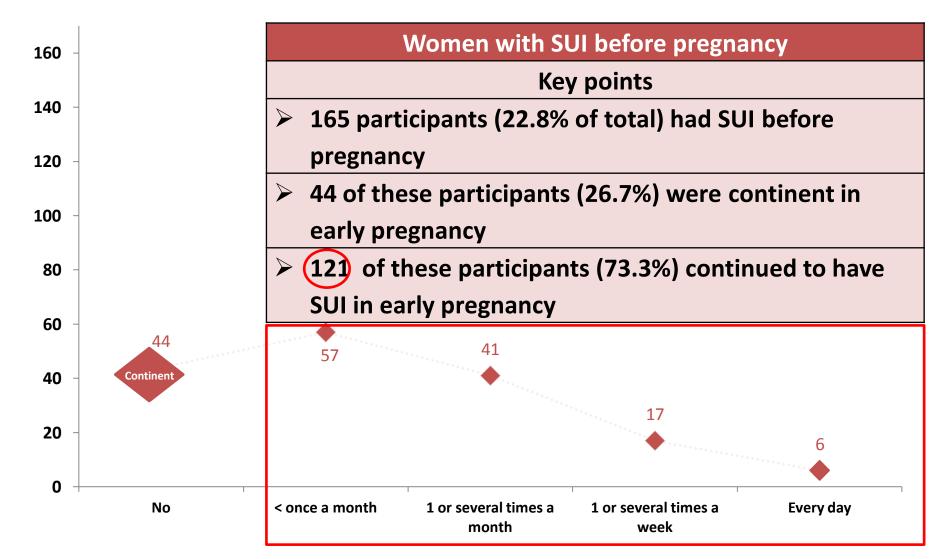






Women with SUI before pregnancy (n=165)







Soiling before pregnancy (n=725)

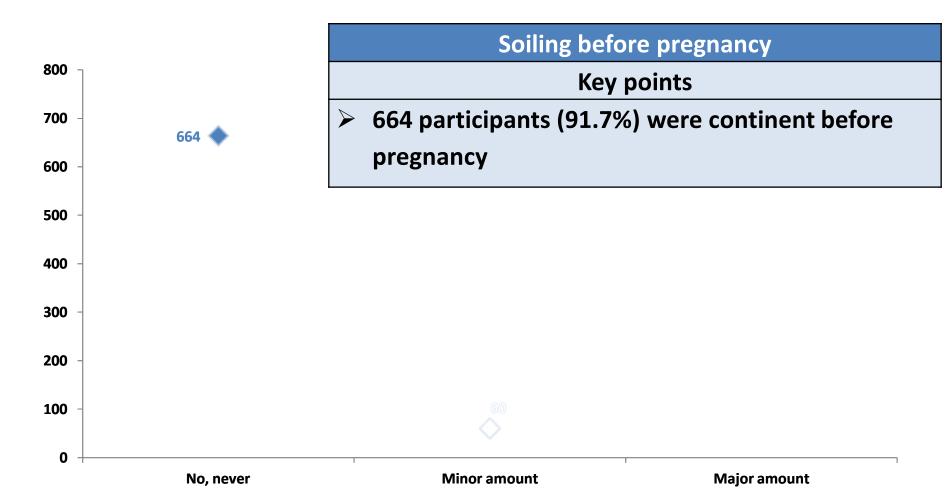


During the 12 months before your pregnancy, did you ever notice soiling from your back passage on your underwear?



Soiling before pregnancy (n=725)

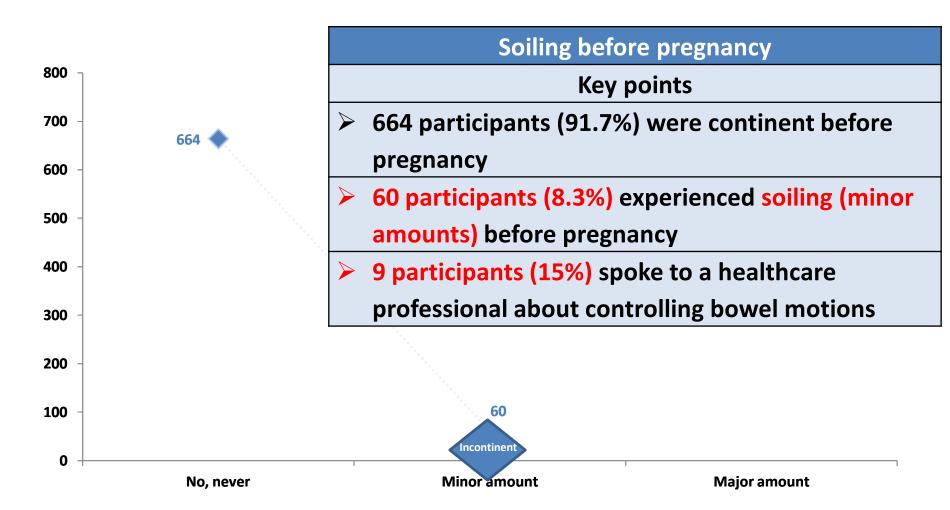






Soiling before pregnancy (n=725)





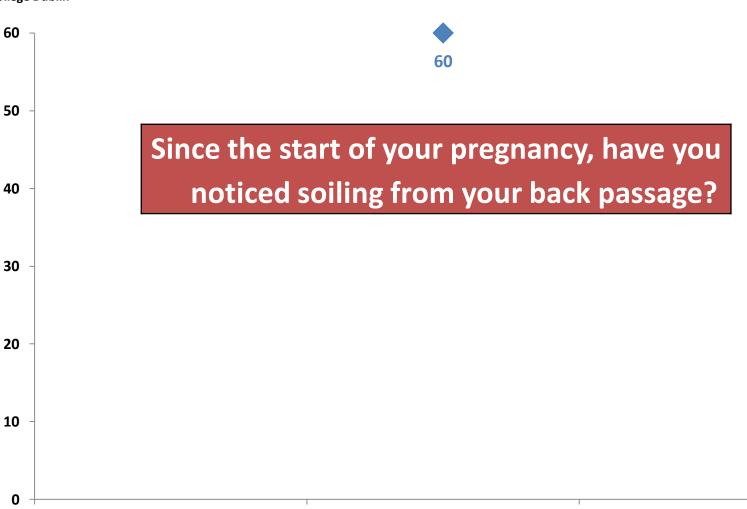


Soiling before and during pregnancy (n=60)



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Yes, major amount



Yes, minor amount

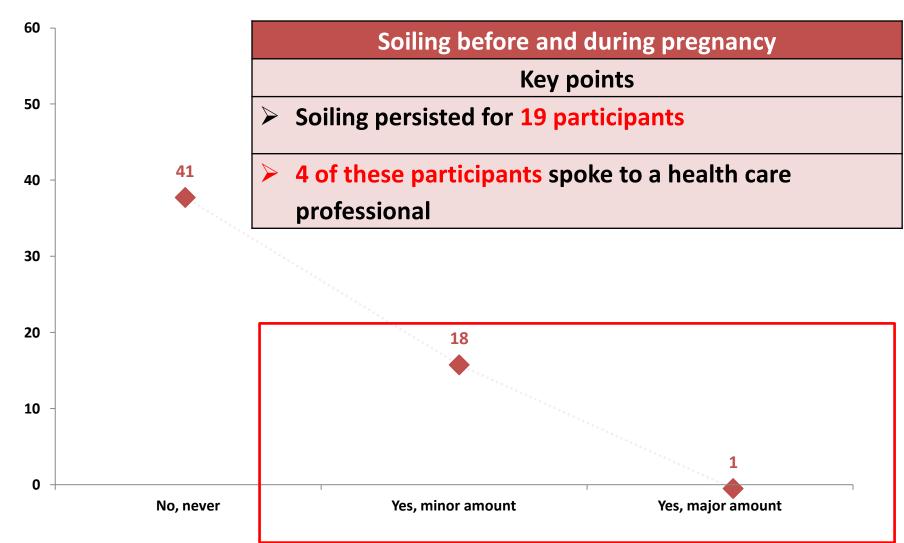
No, never



Soiling before and during pregnancy (n=60)



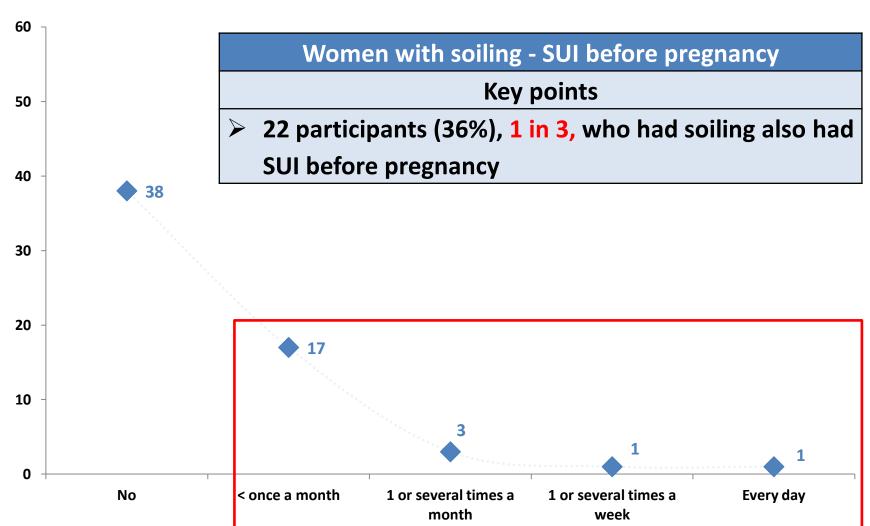






Soiling before pregnancy (n=60) and SUI

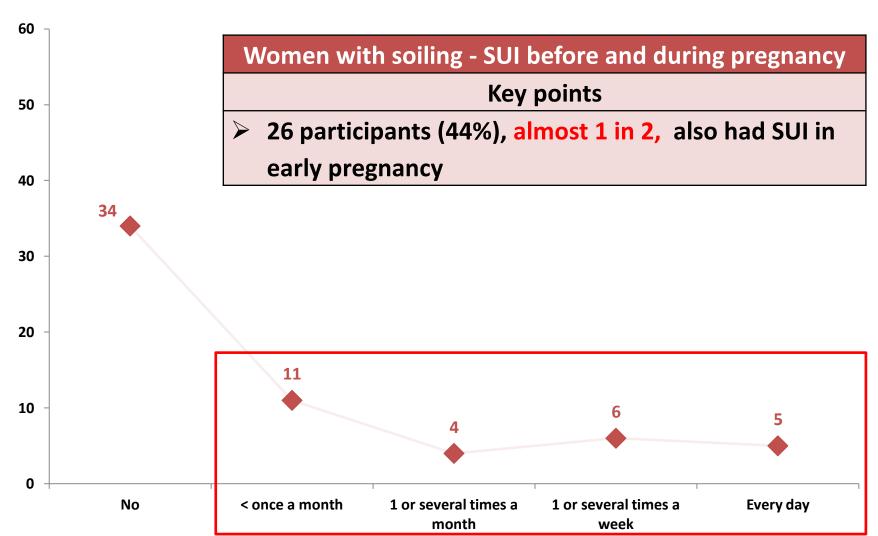






Soiling before and during pregnancy (n=60) and SUI







So what can we learn from these data?



Interpret data with caution as these findings are **preliminary**



However, analysis of data from these 725 women show that...



So what can we learn from these data?



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- More than 1 in 5 participants experienced some degree of urinary incontinence before pregnancy
 - Many did not talk to a healthcare professional
- Almost 1 in 3 participants
 experienced some degree of
 urinary incontinence at start of
 pregnancy
 - Again many did not talk to a healthcare professional

Leaking urine before pregnancy

Key points

- ▶ 165 (22.8%) (1 in 5) participants experienced some degree of SUI before pregnancy
 - > 38 (5.2%) participants experienced SUI one or several times a month or more frequently
- 22 participants (3%) spoke to a healthcare professional

Leaking urine in early pregnancy

Key points

- 242 (32.4%) (1 in 3) participants experienced SUI in early pregnancy
- > 55 participants (8%) spoke to a healthcare professional



So what can we learn from these data?



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- One in 12 participants experienced soiling before pregnancy and this persisted for almost 1 in 3 of these participants
 - Again many did not talk to a healthcare professional

Soiling before pregnancy

Key points

- 60 participants (8.3%) experienced soiling (minor amounts) before pregnancy
- 9 participants (15%) spoke to a healthcare professional about controlling bowel motions

Soiling before and during pregnancy

Key points

- Soiling persisted for 19/60 participants
- 4 of these participants spoke to a health care professional



The relevance



- 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







Whilst UI & FI remains undisclosed and not discussed women who could become continent will continue to be incontinent



The final message



Whilst UI & FI remains undisclosed and not discussed women who could become continent will continue to be incontinent

UI and FI are not normal and can be treated



The MAMMI Study (UI Strand) | IRB



Future work

- The MAMMI study is ongoing
 - Sample size is 1600 (2000 with Galway site)
- Detailed analyses are required before data are truly understood and statistical significance and associations are ascertained
 - Only then can modifiable factors be identified

http://www.mammi.ie/

References

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Sincerest thanks to

- The women (all women including those who are not taking part but who read the information)
- The midwives and midwifery students and other colleagues who are supporting the MAMMI study
- My supervisors Professor Cecily Begley and Professor Mike Clarke
- My colleagues Margaret Carroll, Deirdre O'Malley, Francesca Wuytack
- Rebekah Maguire and Sophie Clare who worked with us on the MAMMI study in summer 2012
- 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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Thanks to the conference organizers and scientific committee for the opportunity to present

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