Familial Clustering of Pelvic Floor Disorders: Association Between Sibling History and Urinary and Fecal Incontinence

Family history is linked to more urinary and double incontinence in women

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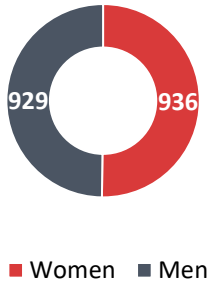
1 Aim

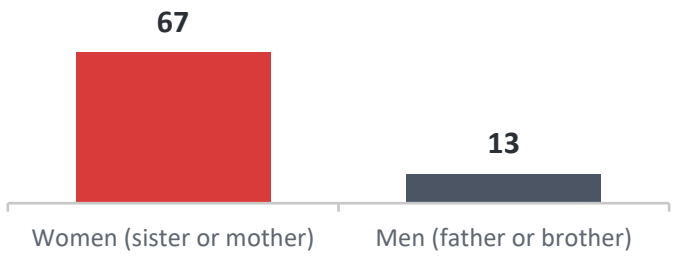
Urinary (UI) and fecal incontinence (FI) are multifactorial, with possible genetic and familial components. We examined the association between family history (sisters and mothers) and UI and FI in the general population of northwest Iran.

2 Methods

- Cross-sectional study, N = 1,865
- Urban and rural areas of 3 northwestern provinces
- Persian ICIQ-OAB, ICIQ-FLUTS, ICIQ-MLUTS, PFDI
- Family history of urinary problems or prolapse in sisters/mothers
- Chi-square tests, $p < 0.05$



3 Positive family history reported



Number of participants; 3.6% and 0.7% of the total sample (N = 1,865)

4 Incontinence in women

18.7% UI prevalence in women with a positive family history, higher than in women without (significant association)

Strongest for stress (SUI) and mixed (MUI) UI

Double incontinence (UI + FI) more frequent

Men: only 13 reports, no strong association

5 Interpretation

- Supports familial clustering in women: genetic predisposition and/or shared environment
- Stronger SUI and MUI link fits heritable connective tissue, pelvic floor support and neuromuscular factors
- More double incontinence suggests susceptibility spans several pelvic floor compartments
- Low family history reporting in men may reflect biology and sociocultural underreporting

6 Conclusion

A positive family history in sisters or mothers is associated with higher UI and double incontinence in women, supporting its use in risk assessment and early screening.

No funding · Ethics: TUMS committee · Helsinki: yes · Consent: yes

www.ics.org/2026/abstract/Abstract 429