

Abstract Title:

Profile of adolescents with Urinary and Fecal Incontinence

Abstract Text:

Hypothesis / aims of study

This study aimed to describe the profile of adolescents with urinary and fecal incontinence.

Study design, materials and methods

This was a descriptive, quantitative study, whose sample consisted of 35 adolescents, aged between 10 to 18 years old with urinary and fecal incontinence. It was conducted in the period of april 2010 to march 2011. Were used a structured questionnaires, respecting ethical values, that had 22 questions: 04 relating to general identification, 04 to socioeconomic factors, 14 clinical and surgical history of the adolescent. The data were put in a database and analyzed with the software Epi Info 6.04d 2001 and the results were presented in table form with their absolute and relative frequencies.

Results

The sociodemographic profile of incontinent patients shows that they were teens, with a higher proportion of females (62.8%), only 4 did not attend to school and almost all lived with their mother. Health conditions checked, 29 had bathrooms in their homes with or without toilet flush.

About their mobility, the majority of respondents (71.4%) has the autonomy to walk without or with little difficulty, and only one safe teen with hard objects. Types of incontinence presented, 60% of them (21/35) had urinary incontinence and anal incontinence. Myelomeningocele was the most frequent cause, present in over half cases.

About surgeries performed most of it (42.9%) were for the conduct of bladder augmentation surgery along with Malone, and 29 (82.9%) of adolescents reported no pain after surgery. Those who felt pain, was quoted as affected the abdomen (2.9%) and other less common sites (14.4%) regions. A large proportion (85.7%) use clean intermittent catheterization as a solution to the urinary incontinence, which is preferably (45.7%) performed through the urethra. The technique has a low incidence (25.7%) of complications, the most frequent was infection, which affected 9 of the 35 patients.

The case of Malone surgery, most of the respondents (28.6%) reported that the main problem that led them to perform the procedure was the loss of feces and gases and less frequently (17.1%) constipation. Of the total, 15 (42.9%) reported not having complications with the enema, and those who had reported trauma in the stoma as the most common complication(11.4%). Of the 20 who underwent surgery Malone, only 1 did not perform due to the Malone Antegrade Continence Enema stoma stenosis.

Interpretation of results

With the collected data it is possible suggest that the sample belonged to different social classes, according to studies, a good wage income may influence the treatment and the appropriate therapeutic management due to high medical costs for these patients.

Another important finding obtained was that most of the respondents had adequate housing conditions, such as brick house with cement floor and flush toilets, which favors the adequate performance of procedures such as clean intermittent catheterization and Malone Antegrade Continence Enema by patients, and all the difficulties of the motor impairment do not stop the treatment.

Concluding message

The fecal and urinary incontinence are conditions that may limit the autonomy of those who lives with them, disposing of large socioeconomic repercussions. Some topics are addressed in scientific circles, especially when dealing with teenagers, but it holds a wide therapeutic range. The study found that the profile of adolescents did not differ from incontinent studied elsewhere, verifying the need for further research in the area in order to facilitate a deeper understanding of the topic and appropriate patient care.