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## **Clinical validation of the revised incontinence tools**

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## Clinical validation of the revised incontinence tools

### Abstract

Introduction: This presentation reports on recent activities to further validate the Revised Urinary Incontinence Scale (RUIS) and the Revised Faecal Incontinence Scale (RFIS) in a range of clinical settings for the treatment of incontinence. These revised tools for the assessment of incontinence were initially developed from an examination of data drawn from a community sample 1-2. Although activities to date have shown that the revised incontinence tools are useful for evaluation and epidemiological research 1,3, the generalisability of these tools is circumscribed by the population samples in which they were developed. Thus, it is essential this work is further replicated in clinical samples, prior to these instruments being widely promoted, adopted and used.

### Keywords

incontinence, revised, validation, clinical, tools

### Publication Details

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**Introduction:** This presentation reports on recent activities to further validate the Revised Urinary Incontinence Scale and the Revised Faecal Incontinence Scale in a range of clinical settings for the treatment of incontinence. These revised tools for the assessment of incontinence were initially developed from an examination of data drawn from a community sample [1,2]. Although activities to date have shown that the revised incontinence tools are useful for evaluation and epidemiological research [1,3] the generalisability of these tools is circumscribed by the population samples in which they were developed. Thus, it is essential this work is further replicated in clinical samples, prior to these instruments being widely promoted, adopted and used.

**Methods:** This study is recruiting patients from a range of practice settings across Australia: particularly specialist and community continence clinics where patients seek and receive incontinence care. To date, eight continence clinics across four States and Territories of Australia have agreed to recruit patients to this study.

The study is examining clinical and patient definitions of continence status, treatment outcomes and success, across four different treatment types:

- Continence Advising (CNAs/CAs);
- Physiotherapy;
- Surgery (note: surgery is usually only given to those whom physiotherapy has failed); and
- Mixed or a combination of treatments.

The study protocol contains the revised continence instruments (RUIS, RFIS), patient satisfaction measures (SAPS) and includes health status and health related quality of life instruments (e.g. SF-36V2, AQoL) and some items from continence specific health related quality of life and/or impact questionnaires (e.g. Incontinence Impact Questionnaire).

**Results:** This study is still in progress so this presentation will focus on the pre-treatment continence status and health related quality of life data for the recruited patients. It will also examine the relationship between these instruments and individual medical conditions, co-morbidity, gender and age, and report on the psychometric properties of the revised continence tools in clinical settings.

**Conclusions:** Although it has already been established that the internal consistency reliability of the revised tools is excellent [1], further validity and reliability data is required to facilitate the clinical uptake of the tools. Importantly, it is necessary to show that the psychometric performance of these scales is equally appropriate in a range of clinical settings for incontinence and that the test-retest reliability or stability of these instruments is also acceptable.

The relationship between clinical indicators (e.g. bowel and bladder diaries), the revised instruments and patient satisfaction will be examined as post-treatment data becomes available. The final report on this study should be available toward the end of 2010.

- 1 Sansoni J, Marosszeky N, Sansoni E & Hawthorne G. Refining Continence Measurement Tools (Final Report). Centre for Health Service Development, University of Wollongong and Department of Psychiatry, The University of Melbourne. 2006.
- 2 Harrison Health Research. South Australian Health Omnibus Survey (SAHOS) Report. South Australian Department of Health, Adelaide. 2004.
- 3 Hawthorne G, Sansoni J, Hayes LM, Marosszeky N & Sansoni E. Measuring Patient Satisfaction with Incontinence Treatment. Centre for Health Service Development, University of Wollongong and the Department of Psychiatry, University of Melbourne. 2006.