This Current Awareness Bulletin is produced by the Yeovil Academy Library to provide staff with a range of continence-related resources to support practice. It includes recently published guidelines and research articles, as well as news and policy items.

**Systematic Reviews and Evidence-Based Synopses**

1. **Conservative Care of Urinary Incontinence in Women**
   History alone is not sufficient to diagnose the full spectrum of urinary incontinence. However, a clear history of urinary leakage with physical activity, in the absence of complicated urinary incontinence features, may be sufficient for stress urinary incontinence diagnosis in conjunction with physical examination.
   
   **Full text: YDH**
   
   2020 Society of Obstetricians and Gynaecologists of Canada

2. **Adjustable continence therapy (ProACT) for the treatment of male stress urinary incontinence: A systematic review and meta-analysis.** (Full text via LibKey)
   To evaluate the efficacy of adjustable balloon devices or adjustable continence therapy (ProACT) in the treatment for male stress urinary incontinence (SUI). Second, to investigate the safety profile and rates of adverse events associated with the implantation of adjustable balloon devices. A review of the literature was performed by searching the PubMed (...) database with the most applicable search terms.
   
   2020 Neurourology and urodynamics PubMed abstract

3. **AMS-800 Artificial urinary sphincter in female patients with stress urinary incontinence: A systematic review.** (Full text via LibKey)
   AMS-800 Artificial urinary sphincter in female patients with stress urinary incontinence: A systematic review. To perform a systematic review of studies reporting the outcomes of AMS-800 artificial urinary sphincter (AUS) implantation in female patients with stress urinary incontinence (SUI) resulting from intrinsic sphincter deficiency (ISD). A systematic literature search of the Medline and Embase databases was performed in June 2018 in accordance with the PRISMA statement.
   
   2020 Neurourology and urodynamics PubMed abstract
Preintervention and postintervention populations were compared using analysis of variance with Fisher least significant difference method used to determine efficacy between groups. Grades for Recommendation, Assessment, Development and Evaluation system was used to categorize quality of evidence as high, moderate, low, or very low. We double screened 4548 abstracts, identifying 98 articles for full-text review.
Full text: YDH
2020 Female pelvic medicine & reconstructive surgery

5. Bulking for stress urinary incontinence in men: A systematic review. (Full text via LibKey)
The review adhered to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses framework of systematic reviews. A comprehensive search of PubMed, Medline, and Embase was undertaken. Only eight original articles met the inclusion criteria.
2020 Neurourology and urodynamics PubMed abstract

6. Heterogeneity of cost estimates in health economic evaluation research. A systematic review of stress urinary incontinence studies. (Full text)
Heterogeneity of cost estimates in health economic evaluation research. A systematic review of stress urinary incontinence studies. There is increased demand for an international overview of cost estimates and insight into the variation affecting these estimates. Understanding of these costs is useful for cost-effectiveness analysis (CEA) research into new treatment modalities and for clinical guideline development.
Full text: YDH
2020 International urogynecology journal PubMed abstract

7. Surgical treatments for women with stress urinary incontinence: the ESTER systematic review and economic evaluation. (Full text)
To evaluate the clinical effectiveness, safety and cost-effectiveness of surgical treatment for stress urinary incontinence (SUI) in women and explore women’s preferences. An evidence synthesis, a discrete choice with no pain or mild chronic pain and shorter length of hospital stay as well as those treatments that have a smaller risk for urinary symptoms to reoccur after surgery.
Full text: YDH
2020 Health technology assessment (Winchester, England) PubMed abstract

8. TVT-O versus TVT-S for female stress urinary incontinence: a systematic review and meta-analysis. (Full text via LibKey)
Tension-free Vaginal Tape Obturator (TVT-O) and Tension-free Vaginal tape Secur (TVT-S) are common surgeries for the treatment of stress urinary incontinence (SUI), several randomized controlled trials (RCTs) have compared the effects of TVT-O and TVT-S, yet the results remained inconsistent.

9. Surgical treatments for women with stress urinary incontinence: a systematic review of economic evidence. (Full text)
Surgical treatments for women with stress urinary incontinence: a systematic review of economic evidence. Surgical interventions for the treatment of stress urinary incontinence (SUI) in women are commonly employed following the failure of minimally invasive therapies. Due to the limited information available on the relative cost-effectiveness of available surgeries for treating SUI, a de novo economic analysis was conducted to assess costs and effects of all relevant surgeries.
Full text: YDH
2020 Systematic reviews PubMed abstract

The objective of this systematic review and meta-analysis was to evaluate the efficacy and the effectiveness, as well as the safety and tolerability, of urethral bulking agents (UBAs) in women with mixed or stress urinary incontinence. PubMed, Scopus, and the Cochrane Central Register of Controlled Trials were used to identify relevant articles.

**Full text: YDH**

2020 *Maturitas*

11. **What Pelvic Floor Muscle Training Load is Optimal in Minimizing Urine Loss in Women with Stress Urinary Incontinence? A Systematic Review and Meta-Analysis. (Full text)**

Pelvic floor muscle training is commonly used for urine loss. However, research studies have not determined which training load is the most effective for women with stress urinary incontinence (SUI).

**Full text: YDH**

2020 *International journal of environmental research and public health* PubMed abstract

12. **Urinary incontinence following subtotal and total hysterectomy: a systematic review. (Full text)**

To evaluate the best surgical approach for the female urinary incontinence. Systematic review conducted in MEDLINE® Cochrane, EMBASE and LILACS database up to September 1st, 2017. Articles were selected according to study type, type of intervention and outcomes. Articles were selected by more than one researcher based on title, abstract and full text. The SIGN checklist was used for bias assessment.

**Full text: YDH**

2020 *Einstein (Sao Paulo, Brazil)* PubMed abstract

13. **Prevalence of female urinary incontinence in the developing world: A systematic review and meta-analysis-A Report from the Developing World Committee of the International Continence Society and Iranian Research Center for Evidence Based Medicine. (Full text via LibKey)**


2020 *Neurourology and urodynamics* PubMed abstract

14. **Systematic review and meta-analysis comparing Adjustable Transobturator Male System (ATOMS) and Adjustable Continence Therapy (ProACT) for male stress incontinence. (Full text)**

Urinary incontinence is one of the most serious complications of prostate cancer treatment. Despite the limitations that studies available are exclusively descriptive and the follow-up is limited, literature findings confirm ATOMS is more efficacious, with higher patient satisfaction and better durability than ProACT to treat male stress incontinence.

**Full text: YDH**

2020 *PloS one* PubMed abstract

15. **Performance and Safety of the Artificial Urinary Sphincter (AMS 800) for Non-neurogenic Women with Urinary Incontinence Secondary to Intrinsic Sphincter Deficiency: A Systematic Review. (Abstract)**

The use of the artificial urinary sphincter (AUS) for female non-neurogenic severe stress urinary incontinence (SUI) due to sphincter deficiency is either not specifically registered and/or reimbursed in some countries worldwide. AUS outcome assessments necessitate well-designed randomised trials, in accordance with current evidence-based medicine requirements.

**Full text: YDH**
16. **Optimisation of RIZIV – INAMI lump sums for incontinence**

2020 **Belgian Health Care Knowledge Centre**

Overall, there is high-certainty evidence that BWL, such as diet and exercise, decreases the prevalence of stress urinary incontinence 15% to 18 (...) % and overall urinary incontinence (UI) by 12% to 17% at 1 to 2.9 years. The certainty of evidence on the long-term impact of these interventions was lower. The certainty of the evidence was moderate to low regarding the benefit of BWL on urgency UI and overactive bladder symptoms. No randomized trials evaluated the impact of surgical weight loss on urinary symptoms, and the certainty of evidence of other study types was very low. There is high-certainty evidence that BWL results in modest improvements.

Full text: YDH

2020 **Female pelvic medicine & reconstructive surgery**

18. **The Impact Of Pelvic Floor Muscle Training On Urinary Incontinence In Men After Radical Prostatectomy (RP) - A Systematic Review. (Full text)**
The purpose of this study was to determine the efficacy of pelvic floor muscle training (PFMT) in the treatment of urinary incontinence (UI) in men after radical prostatectomy (RP). PubMed, ScienceDirect, and Cochrane Library databases were searched for studies published in years 2000-2019. PFMT is an effective treatment for urinary incontinence in men after radical prostatectomy. PFMT improves not only physical parameters but also the quality of life of men after RP. © 2019 Strączyńska et al.

Full text: YDH

2020 **Clinical interventions in aging PubMed abstract**

19. **Correction: Multifaceted self-management interventions for older women with urinary incontinence: a systematic review and narrative synthesis. (Full text)**
Multifaceted self-management interventions for older women with urinary incontinence: a systematic review and narrative synthesis. e028626 corr1 10.1136/bmjopen-2018-028626corr1 eng Journal Article Published Erratum 2019 12 03 England BMJ Open 101552874 2044-6055 IM BMJ Open

Full text: YDH

2020 **BMJ open PubMed abstract**

Obesity and overweight are strongly associated with stress and urgency urinary incontinence, and weight loss has been associated with improvement in urinary incontinence. We aimed to measure pooled effect sizes for different weight loss procedures on incontinence-specific quality of life and incontinence cure rate in a systematic review and meta-analysis.

Full text: YDH

2020 **International urogynecology journal**
Point of Care

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Urinary incontinence after prostate treatment
Urinary diversion is required following cystectomy for benign or malignant conditions. Ileal conduit, continent cutaneous diversion, and orthotopic neobladder are the three most commonly used techniques of urinary diversion. Ileal conduits are the archetypical procedure of incontinent urinary diversions. Urine is directed from the ureters through a segment of isolated bowel to the surface of the abdominal wall via a cutaneous stoma. There, urine drains continuously and is collected by an external appliance adhered to the skin surface.

Surgical management and postoperative outcome of children with bladder exstrophy
Literature review current through: Jun 2020. | This topic last updated: Jan 08, 2020.
Bladder exstrophy is a complex congenital anomaly that is treated surgically. Care for the individual with bladder exstrophy requires life-long care by an experienced and dedicated team of healthcare professionals. Major goals of surgical correction are preservation of normal kidney function, development of adequate bladder storage and function, and provision of acceptable appearance and function of genitalia. Two surgical approaches are currently used to correct bladder exstrophy: modern staged repair of bladder exstrophy (MSRBE), and complete primary repair of bladder exstrophy (CPRBE). Although it is unknown which approach best achieves the goals of surgical outcome, bladder closure in the neonatal period is a major feature of both. In our center, we manage infants with bladder exstrophy with CPRBE.

BMJ Best Practice

Urinary incontinence in women
Last reviewed: June 2020 | Last updated: May 2020
Loss of anatomical support for the uterus.
Late-stage prolapse usually presents as a palpable protruding cervix with vaginal tissue, which is often noticed by the patient. Symptoms include sensation of vaginal bulging, pelvic pressure, urinary frequency or incontinence, incomplete bladder emptying, defecatory dysfunction, and dyspareunia.

Enuresis - Guidelines
Last reviewed: June 2020 | Last updated: January 2020
Primarily nocturnal symptoms in children older than 5 years of age. Differentials include diabetes, medications, emotional problems, UTI, spina bifida, seizure disorder, and neurogenic bladder. Treatment commonly involves behavioural changes, alarm therapy, or desmopressin. Emotional support and encouragement is vital to management.

Faecal incontinence in children - Guidelines
Last reviewed: June 2020 | Last updated: February 2019
Involuntary defecation at inappropriate times, occurring after the typical age of completed toilet training (generally 4 years). In most cases, caused by overflow soiling associated with chronic constipation and severe faecal impaction in an otherwise healthy child without underlying anatomical abnormalities. May have a significant negative impact on the quality of life for the child and the family. A thorough history and physical examination are the crux of diagnosis. Laboratory and radiological studies may be used on a case-by-case basis to determine the underlying aetiology.
Journal Articles

Please click on the blue link (where available) to access the full text. You may need an OpenAthens username and password. To register for an OpenAthens account click here.

If you would like help obtaining any of the articles, please contact the Library.

**NICE Healthcare Databases**

1. **Development and randomised controlled trial of a Continence Product Patient Decision Aid for men postradical prostatectomy.**  
   **Author(s):** Murphy; Laine, Christine; Macaulay, Margaret; Fader, Mandy  
   **Source:** Journal of Clinical Nursing (John Wiley & Sons, Inc.); Jul 2020; vol. 29 (no. 13/14); p. 2251-2259  
   **Publication Date:** Jul 2020  
   **Publication Type(s):** Academic Journal  
   Available at Journal of clinical nursing - from Wiley Online Library Medicine and Nursing Collection 2020  
   This is the first evidence-based CP-PDA, developed using an internationally recognised method. Compared to usual care, it significantly reduced decisional conflict for men choosing continence products postprostatectomy. Relevance to clinical Practice: The CP-PDA provides nurses with the first comprehensive, evidence-based intervention to help postprostatectomy men in complex continence product choices. An online version is available: www.continenceproductadvisor.org.  
   **Database:** CINAHL

2. **Can a patient-focussed bookings approach reduce patient non-attendance in postnatal and continence physiotherapy?**  
   **Author(s):** Brennen, RL'E; MacRae, C. L.; Irving, H.; Zeman, B. J.; Lorentzen, S. L.  
   **Source:** MIDIRS Midwifery Digest; Jun 2020; vol. 30 (no. 2); p. 248-248  
   **Publication Date:** Jun 2020  
   **Publication Type(s):** Academic Journal  
   Patient-focused bookings can be effectively implemented in a postnatal and continence physiotherapy outpatient setting, resulting in reduced non-attendance and wait times and improved clinic utilization.  
   **Database:** CINAHL

**Author(s):** Suzuki; Okochi, Jiro; Iijima, Katsuya; Murata, Taro; Kume, Haruki

**Source:** Geriatrics & Gerontology International; Apr 2020; vol. 20 (no. 4); p. 285-290

**Publication Date:** Apr 2020

**Publication Type(s):** Academic Journal

Available at Geriatrics & Gerontology International - from Wiley Online Library Medicine and Nursing Collection 2020

This study presented the prevalence of urinary, fecal and double incontinence among residents living in long-term care facilities in Japan. The Functional Independence Measure items at baseline were associated with not only continence status, but also improved toileting activity after 3-month comprehensive care. Geriatr Gerontol Int 2020; 20: 285–290.

**Database:** CINAHL

4. The impact of genitourinary syndrome of menopause on continence.

**Author(s):** Hillery

**Source:** British Journal of Nursing; Mar 2020; vol. 29 (no. 6); p. 342-344

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at British journal of nursing (Mark Allen Publishing) - from MAG Online Library

**Abstract:** The author discusses the effect of genitourinary syndrome of menopause on continence. Topics discussed include the decision of the Vulvovaginal Atrophy Terminology Consensus Conference Panel in 2014 to adopt the term "genitourinary syndrome of menopause," the aetiology of recurrent urinary tract infection in postmenopausal women, the role of continence nurses in facilitating discussions on vulvovaginal symptoms in relation to continence.

**Database:** CINAHL

5. Creating awareness of the antegrade continence enema procedure and why nurses need to know about it.

**Author(s):** Woodhouse

**Source:** British Journal of Nursing; Mar 2020; vol. 29 (no. 6)

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at British journal of nursing (Mark Allen Publishing) - from MAG Online Library

**Abstract:** The antegrade continence enema (ACE) procedure is mostly associated with children. Many children who underwent this are now entering adulthood and require expert advice and support from nursing and medical services. This article describes how a poster was created to make health professionals aware of this procedure and provide advice for troubleshooting. The type of flushing solution used for irrigation still seems to be selected by trial and error, depending on what suits each individual. There is little evidence in the literature on skin management for patients practising ACE, so it is pertinent to apply the best evidence available. Adult stoma care nurses will need a detailed understanding of this technique and management in the future, as it is likely that they will be called upon for support and advice.

**Database:** CINAHL
6. Urinary continence outcomes of four years of follow-up and predictors of early and late urinary continence in patients undergoing robot-assisted radical prostatectomy.

**Author(s):** Li ; Zhang, Huan; Jia, Zhuo; Wang, Yunpeng; Song, Yong; Liao, Limin; Zhang, Xu

**Source:** BMC Urology; Mar 2020; vol. 20 (no. 1); p. 1-10

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

**PubMedID:** NLM32188426

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12883-019-1387-5) - from BioMed Central

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12883-019-1387-5) - from Europe PubMed Central - Open Access

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12883-019-1387-5) - from ProQuest (Health Research Premium) - NHS Version

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12883-019-1387-5) - from Unpaywall

The current results demonstrated that CR gradually improved with time within 1 year and stabilized 1 year after the surgery. PLND, NS, and age were significant determinants of continence in the early and late stages, respectively. These parameters could be used for preoperative identification of patients at high risk and counseling about postoperative expectations for urinary continence.

**Database:** CINAHL

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7. 91: The reluctance to use mesh for continence surgery and impact on outcomes of different treatment modalities between 2013 and 2019.

**Author(s):** Bhal ; Bhal, N.; Bisseling, C.; Davies, J.; Jones, J.

**Source:** American Journal of Obstetrics & Gynecology; Mar 2020; vol. 222

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at [American Journal of Obstetrics and Gynecology](https://www.ncbi.nlm.nih.gov/pubmed/3170966) - from Unpaywall

**Database:** CINAHL

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8. Urinary incontinence in adolescents seen at a tertiary paediatric continence service.

**Author(s):**

**Source:** Australian & New Zealand Continence Journal; Mar 2020; vol. 26 (no. 1); p. 6-10

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

**Abstract:** The article focuses on a study based on the understanding about young people with urinary incontinence by comparing initial presentation and treatment response between adolescents aged between 15–18 years and children aged between 4–15 years. It mentions about examining associations between clinical and demographic characteristics and the outcome of case/control status; and presence of chronic conditions that can impact on urinary incontinence included attention deficit hyperactivity disorder.

**Database:** CINAHL
9. Referral patterns to continence physiotherapy services for patients with chronic respiratory conditions.

Author(s):

Source: Australian & New Zealand Continence Journal; Mar 2020; vol. 26 (no. 1); p. 11-19

Publication Date: Mar 2020

Publication Type(s): Academic Journal

Available at Australian and New Zealand Continence Journal - from Unpaywall

Abstract: The article focuses on a study based on the referral patterns to continence physiotherapy services for patients with chronic respiratory conditions. It mentions that physiotherapists (PTs) have a central role in the prevention and treatment of urinary incontinence (UI); and also mentions that referral rates for continence management in patients with both chronic respiratory conditions and UI are low.

Database: CINAHL

10. Registered nurse’s experiences of continence care for older people: A qualitative descriptive study.

Author(s): Borglin ; Hew Thach, Emelie; Jeppsson, Maria; Sjögren Forss, Katarina

Source: International Journal of Older People Nursing; Mar 2020; vol. 15 (no. 1)

Publication Date: Mar 2020

Publication Type(s): Academic Journal

Available at International Journal of Older People Nursing - from Wiley Online Library Medicine and Nursing Collection 2020

The provision of continence care that is based on key nursing standards, such as evidence-based and person-centred care, as well as individualised continence care that is based on evidenced-based guidelines, would ensure an improvement in the continence care that is presently on offer to older people. Implications for practice: Nurses need to embrace leadership at the point of care and to be more visible with the provision of direct care in order to improve continence care for older people receiving home care.

Database: CINAHL

11. Can a patient-focused bookings approach reduce patient non-attendance in postnatal and continence physiotherapy?

Author(s): Brennen ; MacRae, C L; Irving, H; Zeman, B J; Lorentzen, S L

Source: Journal of Public Health; Mar 2020; vol. 42 (no. 1); p. 155-160

Publication Date: Mar 2020

Publication Type(s): Academic Journal

Available at Journal of Public Health - from HighWire - Free Full Text
Available at Journal of Public Health - from Unpaywall

Patient-focused bookings can be effectively implemented in a postnatal and continence physiotherapy outpatient setting, resulting in reduced non-attendance and wait times and improved clinic utilization.

Database: CINAHL

**Author(s):** Yassa; Doğan, Ozan

**Source:** Journal of the Turkish-German Gynecological Association; Mar 2020; vol. 21 (no. 1); p. 57-63

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at Journal of the Turkish-German Gynecological Association - from Europe PubMed Central - Open Access

Available at Journal of the Turkish-German Gynecological Association - from ProQuest (Health Research Premium) - NHS Version

Available at Journal of the Turkish-German Gynecological Association - from Unpaywall

**Abstract:** The International Urogynecological Association (IUGA) and the International Continence Society (ICS) and the Joint IUGA/ICS Working Group on Complications Terminology formulated a standardized terminology and classification of complications related to the use of prosthesis in female pelvic floor surgeries. It was mainly purposed to globally standardize the complications and related definitions in order to obtain factual rates and to enable comparisons and surgical audits. Although this unique classification has frequently been cited in the literature, some concerns have been raised against its complexity of use and inter- and intraobserver variability. This review aimed to discuss the rationale behind the IUGA/ICS complication classification system, underline the opposing views, and provide the Turkish version of an online calculator facilitating the universal coding to increase the utility.

**Database:** CINAHL

13. Context for Practice: Generating and Synthesizing Evidence for Wound, Ostomy, Continence, and Foot and Nail Care.

**Author(s):** Gray, Mikel

**Source:** Journal of Wound, Ostomy & Continence Nursing; Mar 2020; vol. 47 (no. 2); p. 94-95

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at Journal of Wound, Ostomy, and Continence Nursing : official publication of The Wound, Ostomy and Continence Nurses Society - from Unpaywall

**Database:** CINAHL


**Author(s):** Harley; Heerschap, Corey; Hill, Rosemary

**Source:** Journal of Wound, Ostomy & Continence Nursing; Mar 2020; vol. 47 (no. 2); p. 193-194

**Publication Date:** Mar 2020

**Publication Type(s):** Academic Journal

Available at Journal of Wound, Ostomy and Continence Nursing - from Unpaywall

**Database:** CINAHL

Author(s):

Source: Journal of Wound, Ostomy & Continence Nursing; Mar 2020; vol. 47 (no. 2); p. 196-196

Publication Date: Mar 2020

Publication Type(s): Academic Journal

Available at Journal of wound, ostomy, and continence nursing : official publication of The Wound, Ostomy and Continence Nurses Society - from Unpaywall

Database: CINAHL


Author(s): Slade ; Hay-Smith, Jean; Mastwyk, Sally; Morris, Meg E.; Frawley, Helena

Source: Physiotherapy; Mar 2020; vol. 106 (no. 1); p. 119-127

Publication Date: Mar 2020

Publication Type(s): Academic Journal

The main attributes of proficient physiotherapy continence clinicians were high levels of skill, training and experience, enabling an extended scope of practice. Research capability and research co-partnerships were also seen to support implementation of contemporary, evidence-based practice. Therapists new to this field were thought to benefit from structured mentoring, further training and clear career pathways embedded within healthcare systems. Consumer-focussed care was seen as a core skill across all levels of physiotherapy practice.

Database: CINAHL

17. Combining wound, ostomy and continence care: is it time for a paradigm shift in the UK?

Author(s): HOLLOWAY ; LEBLANC, KIMBERLY

Source: Wounds UK; Mar 2020; vol. 16 (no. 1); p. 8-10

Publication Date: Mar 2020

Publication Type(s): Academic Journal

Abstract: The article offers information on promoting cost savings, resource management, research, collaboration and coordination of patient care with other specialities. Topics include examines that it highlights the difficulties in determining who is a wound care specialist and what are the roles and responsibilities of TVN.

Database: CINAHL


Author(s): Karabulut ; Yilmazel, Fatih Kursat; Yilmaz, Ali Haydar; Celik, Erkan Cem; Ceylan, Onur; Ozkaya

Source: Eurasian Journal of Medicine; Feb 2020; vol. 52 (no. 1); p. 57-60

Publication Date: Feb 2020

Publication Type(s): Academic Journal

Available at The Eurasian journal of medicine - from Europe PubMed Central - Open Access
Available at The Eurasian journal of medicine - from ProQuest (Health Research Premium) - NHS Version
Available at The Eurasian journal of medicine - from Unpaywall

The combination of anterior suspension suture and long urethral stump contributed to early improvement in the continence rates.

Database: CINAHL

Author(s): Schwandner; Klimars, Ulrich; Gock, Michael; Schiffmann, Leif; Witte, Maria; Schiergens, Tobias; Rentsch, Markus; Klar, Ernst; Kühn, Florian

Source: Journal of Gastrointestinal Surgery; Feb 2020; vol. 24 (no. 2); p. 411-417

Publication Date: Feb 2020

Publication Type(s): Academic Journal

PubMedID: NLM30825120

A standardized water-holding test can function as an easy and reliable method before stoma reversal to predict sufficient postoperative fecal continence. In case of a sufficient water-holding test despite low manometric pressure levels, the risk for postoperative anal incontinence seems to be low. Preoperative manometric pressure levels do not appear to predict postoperative continence.

Database: CINAHL

20. Role of Endoanal Ultrasonography in Grading Anal Sphincter Integrity in Rectal Prolapse and in Predicting Improvement in the Continence State After Surgical Treatment.

Author(s): Emile; Youssef, Mohamed; Thabet, Waleed; Omar, Waleed; Khafagy, Wael; Farid, Mohamed; Abdelnaby, Mahmoud

Source: Surgical Laparoscopy, Endoscopy & Percutaneous Techniques; Feb 2020; vol. 30 (no. 1); p. 62-68

Publication Date: Feb 2020

Publication Type(s): Academic Journal

PubMedID: NLM31876882

Preoperative EAUS is a useful tool for the assessment of anal sphincter injury in patients with rectal prolapse and for predicting improvement in FI after surgical treatment as higher grades of sphincter injury were associated with less improvement in continence than lower grades.

Database: CINAHL

21. Does urethral length affect continence outcomes following robot assisted laparoscopic radical prostatectomy (RALP)?

Author(s): Lin; O’Callaghan, Michael; David, Rowan; Fuller, Andrew; Wells, Richard; Sutherland, Peter

Source: BMC Urology; Jan 2020; vol. 20 (no. 1); p. 1-7

Publication Date: Jan 2020

Publication Type(s): Academic Journal

PubMedID: NLM32005113

Available at BMC urology - from BioMed Central
Available at BMC urology - from Europe PubMed Central - Open Access
Available at BMC urology - from ProQuest (Health Research Premium) - NHS Version
Available at BMC urology - from Unpaywall

MUL had no effect on baseline continence but had a positive and significant association with continence outcomes over 12 months post RALP.

Database: CINAHL
22. Preoperative pelvic floor muscle exercise for early continence after holmium laser enucleation of the prostate: a randomized controlled study.

**Author(s):** Anan ; Kaiho, Yasuhiro; Iwamura, Hiromichi; Ito, Jun; Kohada, Yuki; Mikami, Jotaro; Sato, Makoto

**Source:** BMC Urology; Jan 2020; vol. 20 (no. 1); p. 1-7

**Publication Date:** Jan 2020

**Publication Type(s):** Academic Journal

**PubMedID:** NLM31973706

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12885-020-1049-5) - from BioMed Central

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12885-020-1049-5) - from Europe PubMed Central - Open Access

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12885-020-1049-5) - from ProQuest (Health Research Premium) - NHS Version

Available at [BMC urology](https://bmcurology.biomedcentral.com/articles/10.1186/s12885-020-1049-5) - from Unpaywall

Preoperatively started PFME appears to facilitate improvement of early urinary continence after HoLEP.

**Trial Registration:** The study was registered with the University Hospital Medical Information Network Clinical Trials Registry in Japan (UMIN000034713); registration date: 31 October 2018. Retrospectively registered.

**Database:** CINAHL

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**Author(s):** Karakeçi ; Eftal, Taner Cüneyt; Keleş, Ahmet; Gölbaşı, Ceren; Onur, Rahmi

**Source:** Turkish Journal of Urology; Jan 2020; vol. 46 (no. 1); p. 63-68

**Publication Date:** Jan 2020

**Publication Type(s):** Academic Journal

Available at [Türk Üroloji Dergisi/Turkish Journal of Urology](https://www.turkurologijidergisi.org/articles/10.5152/turkuro.2020.46.63-68) - from ProQuest (Health Research Premium) - NHS Version

Available at [Türk Üroloji Dergisi/Turkish Journal of Urology](https://www.turkurologijidergisi.org/articles/10.5152/turkuro.2020.46.63-68) - from Unpaywall

SIMS is associated with a significantly improved postoperative pain profile and earlier return to work when compared to MUS.

**Database:** CINAHL

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24. Effect of bladder neck sparing at robot-assisted laparoscopic prostatectomy on postoperative continence rates and biochemical recurrence.

**Author(s):** Preisser ; Busto Martin, Luis; Pompe, Raisa S.; Heinze, Alexander; Haese, Alexander; Graefen, Markus; Tilki, Derya; Busto, Luis

**Source:** Urologic Oncology; Jan 2020; vol. 38 (no. 1); p. 1.e11

**Publication Date:** Jan 2020

**Publication Type(s):** Academic Journal

**PubMedID:** NLM315856543

Available at [Urologic oncology](https://www.urologic-oncology.com/articles/10.1097/UCR.0000000000000797) - from Unpaywall

Patients with BNS had a better chance to be pad-free at 7 days after catheter removal and had a significant shorter time to catheter removal. However, this beneficial effect disappeared with time and no differences in continence rates at 3 months and 1 year were recorded. Moreover, BNS did not negatively affect positive margin or BCR rates.

**Database:** CINAHL
Library Resources

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Trivedi, Prakash; Ajay. Rane

Cruickshank, Jeremy P.; Sue. Woodward

In the News

Work progressing on rapid dipstick test for overactive bladder
20 FEBRUARY, 2020 BY JO STEPHENSON

Scientists say they are a step closer to developing a simple new test to help identify people with an overactive bladder and prevent distressing incontinence.

Incontinence-associated dermatitis 1: risk factors for skin damage
Nursing Times-1 Mar 2020

IAD is caused by continence problems but many factors contribute to its development, such as poor mobility and cognitive impairment. The nature of normal skin ageing and the potential problems associated with that, along with additional risk factors, means IAD is often misdiagnosed and mismanaged as the underlying continence problem is often not addressed. Education in the fields of IAD and continence is lacking but needs to be improved.
Understanding the cause of MASD is important to instigate the appropriate treatment plan but, whatever the cause, the following actions are crucial: Identify patients at risk from MASD; Relieve or reduce the source of moisture; Clean and dry the skin; Protect the skin.
This current awareness bulletin contains an inexhaustive selection of information that has not been critically appraised by library staff. It is therefore the responsibility of the reader to appraise this information for accuracy and relevance.

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