# Urinary and anal incontinence in morbidly obese women considering weight loss surgery.

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## Abstract

**OBJECTIVE:** To estimate prevalence and correlates of urinary and anal incontinence in morbidly obese women undergoing evaluation for laparoscopic weight loss surgery.

**METHODS:** From October 2003 to February 2005, 180 women with body mass index (BMI) of 40 or greater underwent evaluation for laparoscopic weight loss surgery. Using an established Web site, questionnaires were completed to assess symptoms of urinary incontinence, including the Medical, Epidemiological, and Social Aspects of Aging Questionnaire (MESA). Anal incontinence was assessed by asking, "Do you have any uncontrolled anal leakage?" A number of clinical and demographic variables were examined as potential risk factors for urinary incontinence and anal incontinence.

**RESULTS:** Mean age was 39.8 years (range 16-55). Body mass index ranged from 40 to 81 (mean 49.5). Prevalence of urinary incontinence was 66.9% and anal incontinence was 32.0% (45.6% loss of gas only, 21.1% liquid stool only, 24.6% gas and liquid stool only, 8.8% solid stool). In simple logistic regression, presence of urinary incontinence was associated with age (odds ratio [OR] 1.05, 95% confidence interval [CI] 1.01-1.09), number of children (OR 1.54, 95% CI 1.15-2.07), anal incontinence (OR 6.34, 95% CI 4.58-8.71).
2.52-15.93), arthritis (OR 6.04, 95% CI 1.76-20.78), and sleep apnea (OR 2.30, 95% CI 1.21-4.37). Multivariable logistic regression identified 3 factors independently associated with urinary incontinence: number of children (OR 1.55, 95% CI 1.12-2.12), arthritis (OR 5.46, 95% CI 1.51-19.73), and anal incontinence (OR 6.27, 95% CI 2.42-16.26). Presence of anal incontinence was associated only with the presence of urinary incontinence (OR 6.34, 95% CI 2.52-15.93).

**CONCLUSION:** Prevalence of urinary and anal incontinence is high in this group of morbidly obese women as compared with the general population. Studies are needed to determine the effect of weight loss on urinary and anal incontinence symptoms in the morbidly obese woman.