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## Instrument Modification in Urinary Incontinence Research in Minority Women

**Karen D. Novielli, MD\***

\* Thomas Jefferson University

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## Instrument Modification in Urinary Incontinence Research in Minority Women

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Urinary incontinence (UI) is an important health problem for older women affecting 15-30% of community dwelling older women with an estimated annual cost in the United States of \$10-16 billion. UI is associated with significant morbidity including embarrassment, social isolation, depression and increased rates of institutionalization. Less is known about urinary incontinence in minority women. Accurate survey instruments are needed to study this condition.

Jefferson's Senior Health Institute, through a grant from the National Institute on Aging, supported a study to assess the short-term test-retest reliability and validity of a published urinary incontinence instrument in older African-American women.<sup>1</sup> Sixty women over the age of 50 were recruited from the waiting offices of three primary care practices to participate in the study. Fifty-three women completed the study and were included in the analysis. Participants completed the survey instrument over the telephone at baseline and again within four weeks of the initial survey. Within four weeks of the second telephone interview, a physician or nurse interviewed each participant in person. The interview was considered the gold standard to which the study instrument was compared. The outcome of interest was any urinary incontinence reported within the past year. A Phi coefficient of 0.56 was obtained for the 30-day short-term reliability of the survey. Validity was measured by comparing the initial administration of the survey to the physician interview. The urinary incontinence instrument was found to be 97% sensitive and 56% specific for predicting urinary incontinence.

These results suggest that the urinary incontinence instrument tested showed only fair short-term reliability in this population, and performed significantly poorer compared to testing in a Caucasian population where the instrument demonstrated correlation coefficients of 0.7 or higher.<sup>1</sup> Although the instrument was found to be sensitive in detecting urinary incontinence, the poor specificity further limits its use in research. One of the current limitations of urinary incontinence research is development of accurate methods for detecting this condition. Additional work is needed if this instrument is to have adequate psychometric properties for use in incontinence research in African-American women.

### References

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### About the Author

Karen D. Novielli, MD teaches in the Department of Family Medicine and works in the Office of the Dean at Jefferson Medical College, Thomas Jefferson University.