Stress urinary incontinence and genital prolapse are associated with massive obesity in Tunisian women (n=58)

H. Marmouch, Soumaya Tahri, Ines Charrad, Ines Khochtali.

Endocrinology-Internal Medicine department- University Hospital-Monastir-TUNISIA

Abstract
Introduction: Massive Obesity (MO) is defined as a body mass index of 40 kg / m² promotes pelvic static disorders such as urinary incontinence (UI) and genital prolapse (GP). The aim of this study was to specify the bladder, urinary and genital disorders (UD-GD) in women with MO.

Patients and Methods: These are 58 patients with MO. Patients with diabetes mellitus were excluded from the study to with the help of a precise interrogation and a complete clinical examination for all patients, to detect bladder, UD and GD.

Results: Age average patient is 54 years old. The average BMI was 47 Kg / m². There were 32 postmenopausal patients. The association of bladder and sphincteric disorders was more prominent for stress UD (n = 25). For UI due to urgency and overactive bladder, a weaker association was found (n = 14). GP was detected in 15 cases. The concomitant presence of UD-GP was observed with high waist sizes (the highest in this population).

Discussion and conclusion: the weight therefore appears to be a truly modifiable risk factor for UD and GD. Thus, weight loss through a low-calorie diet associated with pelvic floor rehabilitation should be offered as the first line in obese patients suffering from UI. The place of bariatric surgery can be offered in the patient major obese after medical and psychiatric preparation. Bladder sphincter and GD are frequent for obese women especially in presence of MO. A multidisciplinary care would better control these disorders.

Keywords: type 2 Diabetes, Massive Obesity, Urinary Incontinence, Genital Disorder

Abbreviations: Urinary Incontinence (UI), Genital Prolapse (GP), Massive Obesity (MO), Urinary and genital disorders (UD-GD)

Funding and Conflicts of Interest
There is no conflict of interest.