

# O12

## BODY IMAGE AND PELVIC FLOOR DYSFUNCTION: A STUDY OF WOMEN ATTENDING A UROGYNAECOLOGY UNIT

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### Introduction

The relationship between pelvic floor conditions and body-image in women is an emerging area of clinical research. A domain measuring body-image within ePAQ-PF has been previously developed and psychometrically tested. The aim of this observational cohort study was to measure the association between body image and pelvic floor dysfunction in women attending urogynaecology clinics and assess the impact of prolapse surgery on body-image.

### Methods

Outcomes of studies identified in an earlier systematic review of PROMs to assess body-image in urogynaecology were used to formulate 8 hypotheses, that impaired body-image is associated with

- i) Younger age
- ii) Pelvic organ prolapse
- iii) Sexual dysfunction
- iv) Dyspareunia
- v) Overactive Bladder
- vi) Stress Urinary Incontinence
- vii) Anal Incontinence
- viii) Impaired HRQoL (Vaginal)

ePAQ-PF scores in the above domains were compared with the ePAQ-PF body-image domain score using Spearman's rank correlation ( $r$ ) after confirming non-normally distributed data (Shapiro-Wilk's  $W$  test of normality; 0.05). Mean domain scores for body image pre- and post-op for patients undergoing prolapse surgery during the study period were measured and compared using Student's  $t$  test.

### Results

During the study period, 1063 consenting women completed ePAQ-PF. There was moderate correlation between body image and pelvic floor dysfunction in the following variables. (See Table 1) Thirty patients underwent prolapse surgery and completed ePAQ-PF pre-operatively and at 3-months post operation. Mean body image domain scores were significantly lower post op (16.1 versus 5.0,  $p=0.03$ ,  $t=2.18$ ).

### Conclusions

This study provides further evidence that impaired body image is associated with pelvic floor dysfunction and is inversely related to age. Body image issues appear to improve in women

undergoing corrective surgery for pelvic organ prolapse. Further studies are planned to assess other associations and the impact of interventions in larger multicentre studies.