

# ASSESSMENT OF PELVIC FLOOR DYSFUNCTION SYMPTOMS IN PATIENTS REFERRED FOR PELVIC HEALTH PHYSIOTHERAPY USING ePAQ-PELVIC FLOOR PATIENT REPORTED OUTCOME MEASURE

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### Introduction

Pelvic Health Physiotherapy is the first line intervention recommended for most pelvic-floor dysfunction conditions<sup>1</sup>. Patient reported outcome measures (PROMs) support personalised assessment for patients undergoing physiotherapy<sup>2</sup>. The electronic Personal Assessment Questionnaire- Pelvic-Floor (ePAQ-PF) is an electronic PROM which assesses pelvic-floor dysfunction over twenty scored domains<sup>3-5</sup>

### Methods

All patients referred for pelvic health physiotherapy at a teaching hospital were asked to complete ePAQ-PF as part of their assessment. Each ePAQ-PF domain produces a symptom score (0-100) and an impact on health-related quality of life (HRQoL) score (0-3). Mean domain symptom and impact scores were calculated and Pearson correlations between domain symptom(s)/impact score compared as part of a registered audit.

### Results

112 consenting patients completed ePAQ-PF during the study period. Average age was 41 (range 19-81), average BMI was 25.8 (range 18-54) and average parity was 1.3 (range 0-5).

The symptom domains with highest mean average scores were overall sexual function (44.6), sex&vagina (42.3), irritable bowel syndrome (35) HRQoL urinary symptoms (34.6) and vaginal pain&sensation (29.9).

There was significant positive correlation ( $r>0.7$ ) between symptom scores and HRQoL impact scores for all domains except constipation ( $r=0.62$ ) and overall sexual function ( $r=0.11$ ).

There was moderate positive correlation between body image and vaginal prolapse symptom scores ( $r=0.43$ ) compared to weak positive correlation between body image and stress incontinence ( $r=0.18$ ), overactive bladder ( $r=0.07$ ), overall sexual function ( $r=0.14$ ) and bowel continence ( $r=0.06$ ).

### Conclusions

ePAQ-PF provides a personalised pelvic-floor assessment for patients undergoing physiotherapy. Positive correlation between symptom and HRQoL impact scores provides some evidence of construct validity for this PROM. Stronger positive correlation between body image and prolapse, compared to other symptom complexes (SUI/OAB/bowel continence) suggests that prolapse may have a greater impact on body image in this patient group. Further research with larger samples and comparison with pre- and post-physiotherapy ePAQ-PF scores is needed.

### References

1. Okeahialam NA, Dworzynski K, Jacklin P, McClurg D. Prevention and non-surgical management of pelvic floor dysfunction: summary of NICE guidance. *BMJ*. 2022 Jan 6;376.

2. Gray TG, Vickers H, Krishnaswamy P, Jha S. A systematic review of English language patient-reported outcome measures for use in urogynaecology and female pelvic medicine. *International Urogynecology Journal*. 2021;32(8):2033-92.
3. Radley SC, Jones GL, Tanguy EA, Stevens VG, Nelson C, Mathers NJ. Computer interviewing in urogynaecology: concept, development and psychometric testing of an electronic pelvic floor assessment questionnaire in primary and secondary care. *BJOG: An International Journal of Obstetrics & Gynaecology*. 2006;113(2):231-8.
4. Jones GL, Radley SC, Lumb J, Jha S. Electronic pelvic floor symptoms assessment: tests of data quality of ePAQ-PF. *International Urogynecology Journal*. 2008;19(10):1337-47.
5. Jones GL, Radley SC, Lumb J, Farkas A. Responsiveness of the electronic personal assessment questionnaire-pelvic floor (ePAQ-PF). *International Urogynecology Journal*. 2009;20(5):557-64.