

**NATIONAL ASSOCIATION FOR CONTINENCE**  
**STATEMENT OF**  
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"The golden years", as we so fondly call them, may in fact be tarnished if one is plagued with incontinence. Far from the freedom and carefree lifestyle that those years are supposed to provide, incontinence can rob our seniors of their mobility, their autonomy and their feeling of well being.

Incontinence, or fear of urinary leakage, even if it actually has not occurred, is debilitating and humiliating. In 1996 the AHCPR reported that urinary incontinence affects 15 to 30% of community-dwelling adults and at least half of all individuals confined in nursing homes. This represents 13 million Americans, 85% of which are women. Other studies (Kimberly-Clark Inc., and Resnick MD) put those numbers at 18 to 25 million. The problem is associated with aging, although it should not be considered a natural part of that process. It also is not just a problem of the aged, but affects 25% of women between the ages of 30 and 59.

In terms of societal cost, Dr. The-Wei Hu of the University of California at Berkeley has developed the most widely quoted economic model on incontinence. Looking at people 65 years and older, he estimated that the direct costs were 16 billion for this condition, and 28 billion of indirect costs were added to this. Urinary incontinence is a valid predictor of heavy rural nursing home use. Because of fewer community-based services in these settings, older family members may be prematurely institutionalized when their incontinence precludes them being cared for in the home or extended living situation. Based on 1995 figures of the annual cost of long-term care at \$39,000, this is a very expensive proposition. Two-thirds of these residents are covered by Medicare and/or Medicaid, which is an expense the taxpayer bears.

We know that doctors are currently under trained to take care of this problem. Only recently has the diagnosis and treatment of this condition been included in the curriculum and tested for on certification exams in internal medicine. Because incontinence isn't life threatening, it often is overlooked in assessing patient's health, in spite of the far reaching consequences of its diagnosis. Both patients and physicians need to be proactive in assessing the risk for incontinence and treating the problem when it is present.

We need further research and research dollars spent on treatment methodologies and preventive measures with respect to incontinence. Clearly monies spent here would decrease the cost of taking care of these patients and my prevent the problem from occurring at all. There are a number of minimally invasive, cost-effective treatments such as biofeedback and pelvic exercise programs which could be implemented in the older population if funding was available. Again, better enjoyment of the senior years with an increased quality of life and fewer dollars spent overall would be the desirable endpoint.

The National Association for Continence is the largest consumer advocacy organization devoted solely to improving the lives of those suffering from incontinence. We wish to add life to years for our constituency. The cost of the problem is staggering but solutions are at hand. We hope you will consider budgeting funding and devoting your energies to help us solve this problem.