

Vaginal flatus in women with pelvic floor dysfunction: an observational study

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Abstract

Objective To investigate the prevalence of vaginal flatus (VF) in women with pelvic floor disorders and its impact on quality of life. **Design** A cross-sectional study. **Setting** A tertiary medical center. **Population** Women visited a urogynecologic clinic in 2019. **Methods** Patients were asked about their experience of VF. Other evaluations included urodynamics, genital prolapse stage, and valid questionnaires, including the short form of the Pelvic Organ Prolapse/Urinary Incontinence Sexual Questionnaire (PISQ-12), Urogenital Distress Inventory (UDI-6), and Incontinence Impact Questionnaire (IIQ-7). Clinical characteristics, urodynamic parameters, stage of prolapse, and quality of life scores were compared between women with and without VF. **Main Outcome Measures:** The impact of VF on quality of life. **Results:** Among 341 women, 118 (35%) reported VF, which was more common in those who were younger (49.3 ± 9.2 vs. 59.9 ± 13.4 yr, $p < 0.001$) and more sexually active (98% vs. 55%, $p < 0.001$) women. Women with VF had significantly worse sexual function (PISQ-12, 16.3 ± 15.9 vs. 30.9 ± 8.0 , $p < 0.001$), and incontinence-related quality of life (UDI-6, 23.4 ± 10.5 vs. 17.8 ± 8.9 , $p = 0.039$; IIQ-7, 25.5 ± 14.5 vs. 17.2 ± 12.5 , $p = 0.012$). For frequency and bother, 46% (48/116) of the women reported often or always having symptoms during sexual activity, 15% (5/34) when performing daily activities, and 12% (4/31) when exercising; and 60% (70/116) felt least moderate bothersome during sexual activity compared to 5% (2/34) when performing daily activities and 18% (6/31) when exercising. **Conclusions:** VF is prevalent in younger and sexually active urogynecologic patients. It has a significantly negative impact on sexual function. Routine counseling should be considered for these patients.

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