

GP Practice survey indicates that NICE Guidelines are being ignored and budgets wasted

Submitted by: SPM Ltd

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The NICE Clinical Guidelines for the treatment of Urinary Stress Incontinence (USI) in women are under review but a survey just completed by nearly 300 GP practices nationwide confirms that the current guidelines (CG40), in place since 2006, are widely misunderstood and generally ignored. As a result it is estimated that 5,000 new mums each week will develop stress incontinence.

The survey conducted during February 2012 highlights that almost two-thirds of women are sent home with an exercise instruction sheet that meets no criteria for appropriate or clinically substantiated treatment.

The consequence is that tens of thousands of women each month are not getting appropriate advice and the NHS is wasting tens of thousands of pounds of scarce resources.

NICE Best Practice (CG40) recommends that women be individually assessed, trained and supervised by a specialist in a three month programme of Pelvic Floor Exercise (PFEs). Very few women receive this 'Gold Standard Treatment' and the majority are just offered a simple instruction sheet to use unsupervised.

Fewer than 2% of practices are prescribing the PelvicToner device that is clinically proven to be as effective as supervised PFEs but a tenth of the cost.

The online survey highlighted a number of issues:

- three-quarters of GP practices have no policy for dealing with women presenting with symptoms of USI
- nearly half (47.8%) could not correctly identify the current NICE Guidelines
- 41.5% correctly identified the NICE recommended treatment.
- in 45% of cases patients are referred to a practice nurse or GP with a special interest in USI
- 20% are referred to physiotherapy or a continence nurse
- Only 1.5% of practices are prescribing the PelvicToner device
- Overall almost two-thirds (62%) are sent home with an exercise instruction sheet

Specialists in the field have long recognized the weaknesses in the current system. Clinical estimates suggest that a third of women cannot identify their pelvic floor and how to squeeze it in the first place, so giving them just an instruction sheet is of no real benefit and leads to frustration and despair.

Stress incontinence is still a taboo subject and many women will just not discuss the matter with their GP, partners, friends or colleagues. And the problem is huge. There are over 4,000,000 women in the UK with the problem and every week 15,000 new mums are in urgent need of sound advice so that they do not join this growing total. Unfortunately, 5000 or more will – every week!

Pelvic floor rehabilitation in new mums is a matter of great importance yet, universally, this group are

not being offered positive help and advice.

One of the greatest concerns identified by the survey is that very few GPs are aware of the first major advance in the NHS primary care treatment of SUI for over 60 years.

The PelvicToner™ offers much improved outcomes for the women who use it and brings significant cost benefits to the NHS. Prescribing the PelvicToner in the first instance could and should save the NHS GBPmillions and enable the NHS to focus scarce resources such as Continence Advisors, specialist physiotherapists, urologists and surgeons on the most urgent cases.

In any event, many specialists also note that the general level of training that is offered is poor. Supervised PFEs do not expect to see significant improvements inside three months and women just given a sheet of paper rarely see any improvement at all. All this leads to frustration, low motivation and very poor compliance. In contrast, PelvicToner users report rapid improvement and demonstrate eagerness to exercise on a regular basis to maintain a strong and healthy pelvic floor.

Professor Marcus Drake of the Bristol Urology Institute, and the author of the clinical research published in the British Journal of Urology, says: "continence service provision is patchy and this sort of product empowers women, gives them better privacy and the prospect of not wasting their time. In our study the PelvicToner aided women to identify their pelvic floor confidently. It increases patient choice and may promote subsequent compliance and sustained efficacy."

Barry Fowler, MD of PelvicToner manufacturer SPM Ltd, said: "The PelvicToner has been available on prescription for over a year and the cost-benefits to the NHS are well-established. With 15,000 new mums each week, pelvic floor rehabilitation is a major issue yet both GP budgets and their patients are suffering because of the entrenched view that a sheet of exercises is a sufficient treatment."

The PelvicToner™ is a simple, portable exercise device that works by strengthening the walls of the pelvic floor through mild resistance training. This tightens the muscles around the neck of the bladder and prevents urine leaking out when you cough, sneeze, laugh or make a sudden movement.

The PelvicToner costs just GBP31.99 (including p&p) and can be purchased from all good pharmacies, www.pelvictoner.co.uk or from 0117 974 3534.

Any women with stress incontinence or symptoms associated with pelvic floor muscle weakness can now expect their GP to prescribe a PelvicToner™ exercise device. New mums will receive their PelvicToner free of charge on presentation of a valid Maternity Exemption Certificate so there is no excuse for ignoring the potential problem.

For pharmacies the PIP Code is 359-4520.

NOTES FOR EDITORS

For more information and to discuss Reader Offers contact Barry Fowler at press@spml.biz. 0117 974 3534 or 07768 233670

Stress incontinence occurs as a result of reduced support for the bladder, usually by 'sagging' pelvic floor muscles commonly brought-on by childbirth, the natural effects of the menopause, obesity and a lack of regular, effective pelvic floor exercise.

It accounts for 65 per cent of female urinary incontinence and affects around 4 million women in the UK. One in ten women in the workplace suffer, as do a third of all new mothers.

Weak pelvic floor muscles are also a key cause of a lacklustre sex life and PelvicToner exercises have been shown to significantly improve the ability to achieve orgasm. In a user survey, 80% of respondents reported an improved sex life and 62% also reported that their partner noticed improved vaginal tightness.

The benefits of an effective pelvic floor exercise regime have been acknowledged since Arnold Kegel launched his eponymous exercises in 1948. However, the key recommendations of his research went largely unnoticed and few women appreciate how to exercise correctly. When first shown the PelvicToner, Paul Abrams, Professor of Urology at the Bristol Urological Institute said:

"It is 60 years since Arnold Kegel proposed pelvic floor exercises as a treatment for stress incontinence but a simple, effective method of putting all his principles into practice has eluded us. The PelvicToner™ seems to meet all the requirements that Kegel envisaged - it is a simple, patient-friendly, progressive resistance exercise device and provides feedback to the patient that the correct muscles are being engaged."

Research shows that women will suffer the symptoms of stress incontinence for an average of 4 years or more before consulting their GP. Most women will not discuss the problems with their partner, relatives or friends and suffer in silence. Greater openness and media coverage of the issues will thus benefit millions of women.

The two-year randomised study of the PelvicToner at the Bristol Urological Institute (BUI) monitored participants for 16 weeks. The BUI, Britain's leading urodynamics research centre, is based at Southmead Hospital, Bristol.

The researchers said the PelvicToner was "easy to use" and proved "particularly helpful" in the majority of cases. A total of 86 per cent gave a satisfaction rating of seven-out-of-ten or higher. 86 per cent of participants who used the PelvicToner reported a "significant" improvement in their condition.

In supporting the submission to NHS Prescription Services and the robust evaluation that ensued, Professor Drake noted: "Primary care does not provide supervised pelvic floor exercises except in rare cases. The vast majority of women are handed a leaflet and not examined. Supervised PFEs are known to be better than that rather poor service. Thus, in being equivalent to supervised PFEs, PelvicToner is better than unsupervised. The review should not have neglected the distinction between supervised and unsupervised; supervised means that women are actively taught the PF contraction by a highly trained healthcare professional (and hence it is expensive)."

There are a variety of products that purport to strengthen the pelvic floor, but the clinical trials confirm that the PelvicToner is much more effective than expensive electrical stimulation devices and weighted vaginal cones. These alternatives are not recommended by NICE and are not universally advocated by clinicians as they have yet to produce sufficient evidence of efficacy.

The PelvicToner is the first and only pelvic toning device to be recognised by the NHS and a special new category of 'Pelvic Toning Devices' has been created on the Drug Tariff IXA.

The PelvicToner was developed in the UK and is manufactured in the SouthWest.

ENDS

Links:

incontinence, stress incontinence, light adult incontinence, Kegel, pelvic floor, pelvic exercise, pelvic muscle, bladder, NHS, prescription, drug tariff, pelvictoner, pelvic toner, pelvic toning (<http://www.pelvictoner.co.uk>)