



App-Based Treatment of Urinary Incontinence: Is the Time Now?

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HOW IT WORKS

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CURRENT SELECTION

Loohuis AMM, Wessels NJ, Dekker JH, et al. App-based treatment in primary care for urinary incontinence: a pragmatic, randomized controlled trial. *Ann Fam Med*. 2021;19(2):102-109.

Discussion Tips

Urinary incontinence is a common and, likely, under-diagnosed condition in primary care. Treatment options in primary care include physical therapy, pessaries, and/or medications depending on the type of urinary incontinence. Most of these treatment options have small-to-moderate effect sizes. Further and more convenient treatment options would be welcome in clinical practice.

Discussion Questions

What question is asked by this study and why does it matter?

- How does this study advance beyond previous research and clinical practice on this topic?
- What effect size would you expect from the app-based intervention?

- How strong is the study design for answering the question?
 - What is a noninferiority trial?
 - What are the benefits and weaknesses of noninferiority trials (compared to traditional superiority trials)?
 - What is the concern if a noninferiority trial is under-powered to show inferiority?
 - How does the intention-to-treat analysis differ from the per-protocol analysis? How is this different than in superiority trials?
- To what degree can the findings be accounted for by:
 - How patients were selected, excluded, or lost to follow-up?
 - How the main outcome variables were measured?
 - How adherence to treatment in the intervention group was measured?
 - What treatments did usual care group receive?
 - Chance?
- What are the main study findings?
- How comparable is the study sample to similar patients in your practice? What is your judgment about the transportability of the findings?
- What contextual factors are important for interpreting the findings?
 - How would you gauge the potential benefits and harms of the intervention?
- How might this study change your practice? Education? Research?
- Who the constituencies are for the findings, and how they might be engaged in interpreting or using the findings?
- What are the next steps in interpreting or applying the findings?
- What researchable questions remain?

References

1. Stange KC, Miller WL, McLellan LA, et al. Annals Journal Club: It's time to get RADICAL. *Ann Fam Med*. 2006;4(3):196-197. <https://AnnFamMed.org/cgi/content/full/4/3/196>.