## Data Abstraction Form for Questions 2 and 3 How effective is the pharmacological treatment of UI? How effective is the nonpharmacological treatment of UI?

(Complete for each study)

Number of the study in the database (PubMed ID, Cochrane accession number, ISBN) First author Year of the publication Purpose/aim of study Sponsorship
Conflict of interest
Design of the study (check one)  prospective cohort cross-sectional descriptive study case-control case-series randomized controlled clinical trial not randomized clinical interventions other (specify)
Length of intervention Length of followup
Population variables (target population) Recruitment of the subjects
Settings Community (general population) Primary care Specialized clinic
Subjects Race African Continental Ancestry Group, % Asian Continental Ancestry Group, % European Continental Ancestry Group, % Ethnicity African Americans, % Arabs, %

Asian Americans, %
Hispanic Americans, %
Age
Health status
Sample size:
Inclusion criteria
Exclusion criteria
Loss of followup

#### Incontinence (dependent variable)

1. Provide the definition of urinary incontinence used in the article.

2. Provide the data source to measure incontinence.

3. Mark how the outcome was reported.

/\*Complete with values reported in article with page number in articles where data was extracted for quality control\*/ /\*Add as many lines for categories as necessary\*/

/\*Median is calculated when ranges only reported assuming normal distribution\*/

/\*Increment is analyzed when regression coefficients only reported\*/

/\*Provide means and standard deviation (95% CI) when reported\*/

#### Methods to assess urinary incontinence:

Self report\_\_\_\_ Medical diagnosis\_\_\_\_\_ Medical procedure\_\_\_\_\_

## **Urinary Incontinence, Incidence**

Define	
Symptoms	
Signs	
Acuity	
Severity	
Length	
Bothersomeness	

# Urinary Incontinence, Progression Define Symptoms Signs

Acuity\_\_\_\_\_ Severity\_\_\_\_\_ Frequency\_\_\_\_\_

## Urinary Continence

Dependent Continence\_\_\_\_\_ Independent Continence\_\_\_\_\_

### **Clinical Interventions (independent variables)**

Provide the definition of each variable used in the article. For drug and devices: Manufacturing company with the address, trade name

Health Education
Define
Behavioral Therapy
Define
Education
Development of individualized diaries of daily dietary, physical activities, urinary habits
Development of individualized voiding schedules
Voiding schedules: prompted, timed, habit retraining
Patterned urge response toileting
Dose of intervention:
Length of therapy
Intensity of therapy, section number

Biofeedback	
Define Dose of intervention:	
Length of therapy	
Intensity of therapy	
Monitoring device	
Pelvic Floor Muscle Training	
Define Dose of intervention:	
Length of training Intensity of training	
Weight Loss	
Define	
Dose of intervention:	
Length of therapy	
Intensity of therapy	
Diet Therapy	
Define Dose of intervention:	
Length of therapy Intensity (dose) of therapy	
Vaginal Cones Define	
Electrical Stimulation Define	
Dose of intervention:	
Length of therapy	
Intensity of therapy	
Inserts Urethral Patch or Urethral Insert Define	
Vaginal Pessary	
Define	-
Detrol (tolterodine tartrate) Define	
Dose of intervention:	
Length of therapy Dose	
Ditropan Define	
Dose of intervention:	
Length of therapy	
Dose	
Sanctura (trospium chloride) Define	
Dose of intervention:	
Length of therapy	
Dose	

Enablex (darifenacin)

Define
Dose of intervention:
Length of therapy
Dose
Vesicare (solifenacin succinate)
Define Dose of intervention:
Length of therapy
Dose
Botulinum Toxin Injections
Define
Dose of intervention:
Length of therapy
Intensity (dose) of therapy
Oral Estrogen Therapy
Define
Dose of intervention:
Length of therapy
Intensity (dose) of therapy
Topical Estrogen Therapy
Define
Dose of intervention:
Length of therapy
Intensity (dose) of therapy
Magnetic Stimulation
Define

Dose of intervention: Length of therapy\_\_\_\_\_ Intensity (dose) of therapy \_\_\_\_\_

# Urethral Bulking Procedures

Define\_\_\_\_\_ Dose of intervention: Length of therapy\_\_\_\_\_ Intensity (dose) of therapy \_\_\_\_

Intervention	Control	Outcomes Definition	Number in Active	Number in Control	Outcome Level in Active Group	Outcome Level in Control Group	Events in Active Group	Events in Control Group	Relative Risk, (95% CI)	Absolute Risk Difference, (95% CI)
		Urinary in- continence								

## Quality of the studies:

For clinical trials Random allocation Yes No Intention to treat: Yes No not stated but all subjected included in analysis

## Masking of treatment status:

Double blind	
Single blind	
Open label	

## Randomization regime\_\_\_\_

Adequate: computer-generated random numbers or random numbers tables Inadequate: alternation, case record numbers, birth dates, or days of the week

#### Adequacy of randomization

Baseline data not reported Baseline data confirmed the adequacy of randomization\_\_\_\_\_

#### Allocation concealment

Not reported Adequate\_\_\_ Not adequate Adequate approaches to concealment of allocation: Centralized or pharmacy-controlled randomization Serially-numbered identical containers On-site computer based system with a randomization sequence that is not readable until allocation Inferior approaches to concealment of allocation: Use of alternation Case record numbers Birth dates or days of the week Open random numbers lists Serially numbered envelopes (even sealed opaque envelopes can be subject to manipulation)

## For observational studies

Strategies to reduce bias Relevant characteristics of providers\_ Justification for sample size\_\_\_

## Level of evidence of the individual study (check one)

Interventions:

- I Well-designed randomized controlled trial
   II-1A Well-designed controlled trial with pseudo-randomization
- ☐ I-1B Well-designed controlled trial without randomization

**Observational studies** 

- I-2A Well-designed cohort (prospective) study with concurrent controls
- I-2B Well-designed cohort (prospective) study with historical controls
- II-2C Well-designed cohort (retrospective) study with concurrent controls
   II-3 Well-designed case-controlled (retrospective) study
- Large differences from comparisons between times and/or places
- 🗌 IY Opinion of respected authorities based in clinical experience