

# KNOWLEDGE ABOUT CHRONIC URINARY RETENTION AND INCOMPLETE BLADDER EMPTYING AMONG GENERALIST NURSES AND STOMAL THERAPISTS

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## Introduction

Urinary retention is the inability to empty the bladder and can be classified as acute or chronic. Acute retention causes significant discomfort and is more easily identified. Chronic retention may result in recurrent urinary tract infection, pyelonephritis, changes in bladder anatomy and even deterioration of renal function.

Incomplete bladder emptying is even more neglected because it is more difficult to identify since it does not result in palpable bladder distension, requiring theoretical and clinical knowledge regarding lower urinary tract disorders.

Stomal Therapy is a Nursing speciality that contemplates incontinence as one of its subareas. Thus, it is expected that professionals with this speciality have greater knowledge on related themes, such as Urinary Retention and Incomplete Bladder Emptying.

Thus, the research question arises: Is there a difference in the level of knowledge between stomal therapist nurses and generalist nurses or nurses?

## Aim

To compare the level of knowledge regarding Chronic Urinary Retention and Incomplete Bladder Emptying between Stomal Therapist Nurses and Generalist Nurses.

## Method

Cross-sectional study;

The sample consisted of 169 nurses;

Data analysis with a quantitative approach with 15 questions organized into knowledge block socks in relation to urinary retention and incomplete bladder emptying.

Descriptive and inferential analyzes were performed.

## Results

169 women participated in the study, these, 149 were generalist and 21 were Stomatherapist.

Table 02. Average number of right and wrong answers for items in each knowledge block and the total number of right answers, 2022.

Variables	Answers		p*	95% CI	Odds ratio
	Error of one or more items in the block	All the items in the block are correct			
<b>Block 01 – Definitions</b>			0,709	0,168-13,676	1,516
Generalist/other specialties	144 (88,3%)	05 (71,4%)			
Stomatherapist	19 (11,7%)	02 (28,6%)			
<b>Block 02 – Risks for Urinary Retention/Incomplete Bladder Emptying</b>					
Generalist/other specialties	149 (88,2%)	-	-	-	-
Stomatherapist	20 (11,8%)	-	-	-	-
<b>Block 03 – Consequences of Chronic Urinary Retention/Incomplete Bladder Emptying</b>			0,048	0,846-34,562	5,407
Generalist/other specialties	146 (89,0%)	03 (60,0%)			
Stomatherapist	18 (11,0%)	02 (40,0%)			
<b>Block 04 – Warning Signs for Investigation</b>			0,571	0,387-8,560	1,467
Generalist/other specialties	133 (88,7%)	16 (84,2%)			
Stomatherapist	17 (11,3%)	01 (15,8%)			
<b>Block 05 – Diagnosis/Investigation</b>			0,571	0,387-5,560	1,467
Generalist/other specialties	133 (88,7%)	16 (84,2%)			
Stomatherapist	17 (11,3%)	03 (15,8%)			
<b>Block 06 – Treatments/best drainage option</b>			0,361	0,828-0,929	0,877
Generalist/other specialties	143 (87,7%)	10 (4,0%)			
Stomatherapist	20 (12,3%)	-			
<b>Block 07 – Infection Prevention</b>			0,522	0,831-0,930	0,880
Generalist/other specialties	146 (88,0%)	03 (100,0%)			
Stomatherapist	20 (12,0%)	-			
<b>Block 08 – CIC trauma prevention</b>			0,993	0,210-4,701	0,993
Generalist/other specialties	134 (88,2%)	15 (88,2%)			
Stomatherapist	18 (11,8%)	02 (11,8%)			
<b>Block 09 – Prevention of other complications</b>			0,406	0,829-0,930	0,878
Generalist/other specialties	144 (87,8%)	05 (100%)			
Stomatherapist	20 (12,2%)	-			

\* Chi-square

When comparing the groups, there were statistically significant differences only between the knowledge related to the consequences of chronic urinary retention/incomplete emptying of the bladder with p=0.048, the others were the same.

## Concluding Message

The study hypothesis was refuted.

We conclude that both, stomal therapists and generalist nurses need the training to care for patients at risk of urinary retention and incomplete bladder emptying.

## REFERENCES

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