

### **Children's Continence**

# **Current Awareness Bulletin**

#### March 2024

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#### 1. Long-Term Outcome of Transcutaneous Posterior Tibial Nerve Stimulation in the Treatment of Functional Non-Retentive Fecal Incontinence in Children

**Authors:** Abdelrahman, Emad M.;Mohamed, Amr G.;Abdel Ghafar, Mohamed A.;Ahmed, Marwa Elsayed;Ali, Rania R. and Kharoub, Mohamed S.

**Publication Date: 2024** 

Journal: Surgical Innovation 31(1), pp. 33-41

## 2. Mental health problems, stressful life events and new-onset urinary incontinence in primary school-age children: a prospective cohort study

Authors: Warne, Naomi; Heron, Jon; von Gontard, Alexander and Joinson, Carol

**Publication Date: 2024** 

**Journal:** European Child & Adolescent Psychiatry 33(3), pp. 871-879

Abstract: Emotional/behaviour problems and exposure to stressful life events are thought to contribute to new onset of urinary incontinence (UI) amongst children who have attained bladder control. However, very few prospective studies have examined these associations. We assessed whether mental health problems and stressful life events were associated with subsequent new onset in UI using multivariable logistic regression in a prospective UK cohort (n = 6408). Mothers provided information on their child's symptoms of common mental disorders (Development and Wellbeing Assessment, 7 years), stressful life events (7-8 years) and wetting (day and night, 9 years). There was strong evidence that separation anxiety symptoms were associated with new-onset UI in the fully adjusted model (OR (95% CI) = 2.08 (1.39, 3.13), p < 0.001). Social anxiety, attention-deficit hyperactivity disorder and oppositional defiant disorder symptoms were associated with new-onset UI, but these associations attenuated following adjustment for child developmental level and earlier emotional/behaviour problems. There was weak evidence for a sex interaction with stressful life events (p = 0.065), such that females experiencing more stressful life events were at higher risk of new-onset UI (fully adjusted model OR (95% CI) = 1.66 (1.05, 2.61), p = 0.029), but there was no association in males (fully adjusted model OR (95% CI) = 0.87 (0.52, 1.47), p = 0.608). These results suggest that separation anxiety and stressful life events in girls may lead to an increase in UI.

### 3. Efficacy of atypical antipsychotics in the treatment of fecal incontinence in children and adolescents: a randomized clinical trial

**Authors:** Zahed, Ghazal;Fatahi, Somaye;Tabatabaee, Leila;Imanzadeh, Negar;Seraj, Shaikh Sanjid;Wolters, Benjamin Hernández and Hosseini, Amirhossein

**Publication Date: 2024** 

Journal: BMC Pediatrics 24(1), pp. 1-7

#### Sources Used:

A number of different databases and websites are used in the creation of this bulletin.

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