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Price & Availability

Within public domain. Click here to view instrument.

Brief Description of Instrument

The ICIQ-SF (short form) is a 3 item disease specific questionnaire, using a likert type scale. It
was developed based on expert clinical input and feedback from patients with incontinence or other lower urinary tract symptoms. The total score ranges from a low of 0 to a high of 21 and is calculated as the sum of responses to 3 questions.

Scale Format

Likert-type scale, for question 3, answers range from 0=Never to 5= All the time and for question 4, answers range from 0=none to 6= a large amount. For question 5 responses are presented as a numeric rating scale from 0= not at all to 10= a great deal.

Administration Technique

Self administered questionnaire.

Scoring and Interpretation

The total score ranges from a low of 0 to a high of 21 and is calculated as the sum of responses to 3 questions. The higher the score, the greater level of incontinence. The ICIQ simultaneously assesses the self-perceived impact of incontinence alongside symptom severity. This is
important when making decisions regarding whether an individual is likely to require or benefit from treatment.

**Test-retest Reliability** – Agreement was good to very good for all items excluding "overall quality of life", which was moderate. Agreement between test and retest responses were analysed by graphical interpretation and the weighted Kappa statistic for ordered categorical data rather than a correlation coefficient that would not adequately represent levels of agreement.

**Internal Consistency** – Chronbach's alpha coefficient was very high (0.95), indicating excellent internal consistency.

**Construct Validity** – The ICIQ clearly differentiated between males and females, with community-based women reporting more incontinence than men (58.9% and 25.2% respectively, P < 0.001). It also detected a lower prevalence of incontinence in the community sample than in urology clinic attendees (44.7% and 97.2% respectively, P < 0.001) and demonstrated a clear association between sex and the perceived causes of incontinence in both the clinic and the community samples (P < 0.001). As anticipated, stress incontinence was the most predominant in community women, in contrast to men where urge incontinence was the most commonly reported.
Content & Face Validity – The content validity was deemed acceptable with demonstrated patient understanding of the questions.

Published APN Studies Using Instrument


Related Methods Articles (Not reviewed)
