Comparison 1: Postnatal PFMT compared with no intervention or usual care for (mixed) prevention or treatment of incontinence

Source: Woodley SJ, Lawrenson P, Boyle R, Cody JD, Mørkved S, Kernohan A, Hay-Smith EJC. Pelvic floor muscle training for preventing and treating urinary and faecal incontinence in antenatal and postnatal women. Cochrane Database Syst Rev.2020;(5):CD007471.

Certainty assessment							№ of patients		Effect		Certainty (GRADE)	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	PFMT	No PFMT or usual care	Relative (95% CI)	Absolute (95% CI)		
Urinary incontinence early postnatal period (0–3 months) – PFMT vs no PFMT												
2	randomized trials	very serious [a]	not serious	not serious	not serious	none	70/194 (36.1%)	65/127 (51.2%)	**RR 0.54** (0.44 to 0.66)	**235 fewer per 1000** (from 287 fewer to 174 fewer)	⊕⊕◯◯ LOW	CRITICAL
Urinary incontinence mid–postnatal period (> 3–6 months) – PFMT vs usual care												
5	randomized trials	very serious [a]	serious [b]	not serious	not serious	none	374/1421 (26.3%)	390/1379 (28.3%)	**RR 0.95** (0.75 to 1.19)	**14 fewer per 1000** (from 71 fewer to 54 more)	⊕◯◯◯ VERY LOW	CRITICAL
Urinary incontinence late postnatal period (> 6–12 months)												
3	randomized trials	serious [c]	not serious	not serious	serious [d]	none	110/425 (25.9%)	118/401 (29.4%)	**RR 0.88** (0.71 to 1.09)	**35 fewer per 1000** (from 85 fewer to 26 more)	⊕⊕◯◯ LOW	CRITICAL
Urinary incontinence late postnatal period (> 6–12 months) – PFMT vs no PFMT												
1	randomized trials	very serious [a]	not serious	not serious	very serious [d,e,f]	none	6/51 (11.8%)	8/56 (14.3%)	**RR 0.82** (0.31 to 2.21)	**26 fewer per 1000** (from 99 fewer to 173 more)	⊕◯◯◯ VERY LOW	CRITICAL
Urinary incontinence late postnatal period (> 6–12 months) – PFMT vs usual care												
2	randomized trials	serious [c]	serious [b]	not serious	serious [d]	none	104/374 (27.8%)	110/345 (31.9%)	**RR 0.88** (0.71 to 1.10)	**38 fewer per 1000** (from 92 fewer to 32 more)	⊕◯◯◯ VERY LOW	CRITICAL
Faecal incontinence early postnatal period (0–3 months) – PFMT vs usual care												
1	randomized trials	very serious [a]	not serious	not serious	serious [d]	none	21/816 (2.6%)	22/793 (2.8%)	**RR 0.93** (0.51 to 1.67)	**2 fewer per 1000** (from 14 fewer to 19 more)	⊕◯◯◯ VERY LOW	CRITICAL

Certainty assessment							№ of patients		Effect		Certainty (GRADE)	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	PFMT	No PFMT or usual care	Relative (95% CI)	Absolute (95% CI)		
Faecal incontinence late postnatal period (> 6–12 months)												
1	randomized trials	very serious [a]	not serious	not serious	very serious [d,e,f]	none	2/51 (3.9%)	3/56 (5.4%)	**RR 0.73** (0.13 to 4.21)	**14 fewer per 1000** (from 47 fewer to 172 more)	⊕◯◯◯ VERY LOW	CRITICAL
Faecal incontinence late postnatal period (> 6–12 months) – PFMT vs no PFMT												
1	randomized trials	very serious [a]	not serious	not serious	very serious [d,e,f]	none	2/51 (3.9%)	3/56 (5.4%)	**RR 0.73** (0.13 to 4.21)	**14 fewer per 1000** (from 47 fewer to 172 more)	⊕◯◯◯ VERY LOW	CRITICAL
Postnatal quality of life (related to urinary incontinence)												
1	randomized trials	serious [c]	not serious	not serious	very serious [d,f,g]	none	13	10	-	MD **0.5 higher** (5.53 lower to 6.53 higher)	⊕◯◯◯ VERY LOW	CRITICAL
Postnatal quality of life (related to urinary incontinence) – PFMT plus vs PFMT												
1	randomized trials	serious [c]	not serious	not serious	very serious [d,f,g]	none	13	10	-	MD **0.5 higher** (5.53 lower to 6.53 higher)	⊕◯◯◯ VERY LOW	CRITICAL

CI: confidence interval; MD: mean difference; RR: risk ratio.
a. Most of the pooled effect provided by studies “B” or “C” but with a substantial proportion (i.e. > 50%) from studies “C”.
b. Severe, unexplained, heterogeneity ($I^2 \geq 60\%$ or $Chi^2 < 0.05$).
c. Most of the pooled effect provided by studies “B” or “C” but without a substantial proportion (i.e. < 50%) from studies “C.
d. Wide confidence interval crossing the line of no effect.
e. Less than 300 participants.
f. Few events.
g. Less than 400 participants.