

EDITORIAL

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I am happy to report that the 30th National Conference on Incontinence, held last week in Melbourne, was a resounding success. The ability to meet with colleagues, old friends and make new connections was warmly welcome and, for many of us, a great relief! The definition of a conference, from the Oxford Dictionary is that they are “a formal meeting of people with a shared interest, typically one that takes place over several days”. It is so much more! It is about sharing knowledge learning to communicate that knowledge but, just as importantly, it is about networking. So great kudos to all the organisers for this year’s event, as I think it ticked those boxes successfully.

Highlights were many and our opening speaker Dylan Alcott, interviewed by his childhood district nurse Janie Thompson, set the scene for a motivating meeting; an inspirational person and one who was able to set the scene for the tracks on mental health.

We heard about initiatives in aged care, youth and children who have autism, many interesting research projects underway around Australia, new methods to repair mesh injury and, in the maternal birth summit, there was a reminder from Amy Dawes, the CEO and co-founder of the Australasian Birth Trauma Association (ABTA), of the need for mother-centred care and to listen to the voice of birth mothers.

The first paper in this edition is on administration timing of intravesical botulinum toxin A for overactive bladder. This novel study investigated the effect of using an automated rebooking system versus patient- or doctor-initiated rebooking and how these systems impacted on delays. It certainly highlights that using platforms that we are all becoming familiar with is effective in the health system.

On the topic of pregnancy, this winter edition includes a review of the literature comparing evidence for pelvic floor muscle training to usual care or combined with other exercises to prevent urinary incontinence during pregnancy. The authors conclude that the evidence suggests the protective effect of pelvic floor muscle training during pregnancy is optimised when the dosage of exercise is sufficient and when the training is monitored by a healthcare professional. This is such an

important issue, with many women in maternity care services both in Australia and New Zealand not being able to access good information on pelvic floor health during and after pregnancy. Opportunities to highlight this, such as the maternity summit and this paper, need promotion.

In planning for coming ANZCJ editions, we invite papers reporting co-design projects or research on the lived experience of bladder and bowel incontinence from cohorts across the life span. Other papers on topics of aged care, men’s health and children’s continence are sought for future themed editions.



Nga mihi nui
(Go well)

Dr Jenny Kruger
Editor ANZCJ

Retraction statement

Miller J. Engaging Aboriginal and Torres Strait Islander women in a continence conversation: a report from the ICS conference 2021. Australian and New Zealand Continence Journal 2021; 27(4):97-98. DOI <https://doi.org/10.33235/anzcj.27.4.97-98>.

This article is retracted with agreement by the author, the Australian and New Zealand Continence Journal editors and the Continence Foundation of Australia. The article contained wording that may have caused distress to Aboriginal and Torres Strait Islander peoples.