

**HEINCT**

We would like to ask you about incontinence.

During the last 12 months, have you lost any amount of urine beyond your control?

1 Yes

2 No

*IF whether lost urine beyond control = yes [HeInct = 1]*

**HEINCTA**

When you had this problem, did it last for more than 1 month?

1 Yes

2 No

END OF FILTER

**HEBOW**

During the last 12 months, have you had any problems controlling your bowels.

By problems controlling your bowels we mean that this could result in accidentally having soiled pants, leakage from the bowel, needing to go to the toilet frequently or urgently, sometimes not making it to the toilet in time, or using aids or appliances to manage bowel problems or incontinence. Please include problems with your bowel caused by any medicines that you take?

01 Yes

02 No

*IF had a problem controlling bowels in last 12 months = yes [HeBow = 1]*

**HEBOWA**

When you had this problem, did it last for more than 1 month?

01 Yes

02 No