

## MULTI SYSTEM COMPLAINTS IN MEN WITH INTERSTITIAL CYSTITIS/PAINFUL BLADDER SYNDROME

### Hypothesis / aims of study

Interstitial Cystitis/Painful Bladder Syndrome (IC/PBS) is most commonly characterized by urgency and frequency of urination, painful urination, and chronic pelvic pain. IC/PBS is infrequently diagnosed in men. Men with refractory pelvic pain and lower urinary tract symptoms who are ultimately found to have IC/PBS frequently demonstrate a common constellation of non-genitourinary symptoms. The purpose of this study was to review the signs, symptoms, and co-morbidities of men with chronic pelvic pain and voiding dysfunction in an effort to better characterize this patient population.

### Study design, materials and methods

A retrospective analysis of male patients who underwent cystoscopy and hydrodistension for pelvic pain and lower urinary tract symptoms in the last 5 years was performed. Each patient's workup included a detailed history and physical, urine and semen cultures, and course of antibiotics. The diagnosis of IC/PBS was based on glomerulations found in the bladder mucosa after cystoscopic hydrodistension under general anesthesia. Demographic and treatment related outcomes were reviewed.

### Results

From January 2005 to July 2009, 147 men underwent cystoscopy with hydrodistension under general anesthesia for clinical symptoms of IC/PBS. A total of 82 men demonstrated National Institute of Diabetes and Digestive and Kidney Diseases objective criteria for IC/PBS. In addition to their chronic pelvic pain, 81% of these men had common associated co-morbidities including chronic gastrointestinal complaints (41%), anxiety/depression (37%), chronic back pain (34%), chronic joint pain/neuropathy (23%), and/or migraines (9%). Also, 33% of patients were being treated with narcotics and/or benzodiazepines.

### Interpretation of results

Our study shows that men with objective evidence of IC/PBS frequently exhibit a constellation of symptoms typified by non-genitourinary complaints. These constitutional complaints often parallel those of female patients with IC/PBS.

### Concluding message

Based on our experience, men with IC/PBS demonstrate characteristic psycho-social, chronic pain, and gastrointestinal problems that concomitantly and adversely affect quality of life which are similar to those found in women. These clinical findings support the role of a multi-disciplinary approach for males with PBS.

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<b><i>Is this a clinical trial?</i></b>	<b>No</b>
<b><i>What were the subjects in the study?</i></b>	<b>HUMAN</b>
<b><i>Was this study approved by an ethics committee?</i></b>	<b>Yes</b>
<b><i>Specify Name of Ethics Committee</i></b>	<b>University of Tennessee IRB</b>
<b><i>Was the Declaration of Helsinki followed?</i></b>	<b>Yes</b>
<b><i>Was informed consent obtained from the patients?</i></b>	<b>No</b>