

TAKING DRUG HISTORY IN PATIENTS WITH REFRACTORY STORAGE SYMPTOMS

Hypothesis / aims of study

Pharmacotherapy remains the first-line treatment for management of overactive bladder (OAB) that is characterized with the storage symptoms, but the several drugs currently available do not cure the condition for most patients [1,2]. In such a case, it is recommended changing of or adding an antimuscarinic agent before any minimal invasive treatment [3]. Then, a physician needs to know the previously failed drug therapy in determining which antimuscarinic to prescribe for such an individual. However, some patients with refractory storage symptoms cannot verify the drug history due to unfamiliarity to drugs' names, missed medical records or possibly low intellectuality. To know the previous agents used for such patients, we developed a new drug control visual, including the pills and the packages of the available agents in our country's market for the management of the storage symptoms and investigated whether this special tool improve taking drug history from the patients with refractory storage symptoms in this prospective study.

Study design, materials and methods

The patients who presented with refractory OAB symptoms to our outpatient clinic were asked about previous drug history and the patients who could not give information on previous drug history were enrolled into this study. Then, the drug control visual (DCV) were showed to these patients. The tool did not include the form of desmopressin nasal application. Both conventional method of taking history and DCV method was compared statistically with McNemar test.

Results

A total of 22 patients (5 female, 17 male) were studied (mean age 28, range 20-74). The characteristics of patients and findings were presented in the table. Conventional history taking method yielded adequately 44.4% of drugs used previously, while DCV provided 100% of drugs used previously ($p < 0.001$).

Interpretation of results

DCV improves taking drug history from the patients with refractory storage symptoms, compared to conventional method of taking history.

Concluding message

Drug control visual can provide adequate drug history in patients who presented with refractory storage symptoms and could not give information on previous drug therapy.

Table. Patients characteristics and the results.

Characteristics		Missing/false recall (8)	Not recalling(14)
Sex	Female	5	3
	Male 17	2	11
Education status	Literate	2	1
	Primary school	8	5
	Secondary school	6	4
	High school	4	2
	University 2	0	2
Diagnosis	Enuresis nocturna	12	5
	OAB 10	7	9
Drug use	Single	7	7
	Multiple15	0	7

The number of drug name taken	By conventional anamnesis	19	0
	By DCV	41	26

References

1. Dmochowski RR. The puzzle of overactive bladder: controversies, inconsistencies, and insights. *Int Urogynecol J* 2006;17: 650–658.
2. Wein AJ, Rackley RR. Overactive bladder: a better understanding of pathophysiology, diagnosis and management. *J Urol.* 2006;175:5-10.
3. Bolduc S, Moore K, Lebel S, Lamontagne P, Hamel M. Double anticholinergic therapy for refractory overactive bladder. *J Urol.* 2009;182(4 Suppl):2033-8.

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<i>Is this a clinical trial?</i>	Yes
<i>Is this study registered in a public clinical trials registry?</i>	No
<i>Is this a Randomised Controlled Trial (RCT)?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	This is a routine part of the diagnostic process
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes