

## THE CORRELATION BETWEEN POTENTIALLY TRAUMATIC EXPERIENCE AND SUBJECTIVE SYMPTOMS IN WOMEN WITH INTERSTITIAL CYSTITIS/PAINFUL BLADDER SYNDROME (IC/PBS) IN TAIWAN

### Hypothesis / aims of study

IC/PBS is a chronic disease of uncertain etiology that is characterized by urgency, frequency, and suprapubic pain related to bladder filling. Early stressful experience, such as childhood sexual maltreatment, has been considered as an environment risk factor for IC/PBS. However, the definition and the scope of potentially traumatic experience vary in studies. It is unclear to what an extent this experience prevails in patients with IC/PBS and links to its symptom profile. It is therefore the intent of the present study to investigate the traumatic experiences prevalence in IC/PBS patients and correlation between traumatic experience and subjective symptoms.

### Study design, materials and methods

This was a prospective case control study. Fifty female patients who were compatible with the NIDDK criteria were included and these patients were assessed by validated questionnaire including O'Leary-Sant Symptom (ICSI) and Problem Index (ICPI) was used to objectify subjective symptoms. Pelvic Pain and Urgency/Frequency (PUF) questionnaire was also completed and standardized self-report instruments, Chinese Brief Betrayal-Trauma Survey (BBTS) questionnaire was used to measure the prevalence of diverse potentially traumatic experiences (natural disasters, traffic accidents, physical and sexual assaults, emotional maltreatment, and witnessing other's negative events) in childhood and adulthood. Subjects were tested individually in two sessions, in order to avoid fatigue. Of 200 Taiwanese college students who was selected randomly served as controls. These data were analysed using Pearson correlations.

### Results

Patient demographics show the average age being 40.34 years (+/- 9.6). The average ICSI, ICPI, and PUF questionnaire were 11.81 (+/- 3.5), 10.89 (+/- 2.8), and 19.02 (+/- 5.3) respectively. The prevalence of physical attack and emotional maltreatment by someone close to the patients showed 14% and 27% compared to control groups, 9% and 12% respectively. Another prevalence of physical attack and sexual maltreatment by someone not so close to the patients showed 8% and 6% compared to controls, 12% and 6% respectively. (Table 1) Correlation analysis with Pearson correlation coefficients showed negative correlation between ICSI and sexual maltreatment by someone close to the patients (P=0.06).

### Interpretation of results

Our result showed that women with IC/PBS endorsed higher incidences on various traumatic experiences except for sexual maltreatment in both childhood and adulthood. Diverse life events prevail in patients with IC/PBS. Nevertheless, potentially traumatic experiences did not reliably predict the symptom profiles of IC/PBS. Only sexual maltreatment by someone close to patients had negative correlation with subjective symptoms, ICSI.

### Concluding message

Our study showed that, the prevalence of interpersonal abuse, especially those inflicted by someone close to the patients, was higher in patients with IC/PBS. However, potentially traumatic experiences did not reliably predict the symptom profiles of IC/PBS. The IC/PBS patients with sexual maltreatment by someone close to patients may have lower subjective symptoms.

Table 1 Prevalence of traumatic experiences in IC patients (N = 50) a Taiwanese college sample (N = 200)

		At childhood		At adulthood	
		(before 18)		(after 18)	
High-betrayal trauma					
		IC_P	College	IC_P	College
03	Witnessing people being attacked	.12	.06	.16	.00
05	Witnessing people attacking others	.18	.07	.16	.01
06	Physical attack	.14	.09	.20	.03
08	Sexual maltreatment	.08	.05	.06	.02
10	Emotional/psychological maltreatment	.27	.12	.26	.06
Low-betrayal trauma					
04	Witnessing people being attacked	.12	.12	.14	.02
07	Physical attack	.08	.12	.06	.02

09	Sexual maltreatment	.06	.06	.02	.01
Other trauma					
11	Death of own children	.04	.00	.02	.00

#### References

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3. Goldberg, L. R., & Freyd, J. J.: Self-reports of potentially traumatic experiences in an adult community sample: Gender differences and test-retest stabilities of the items in a Brief Betrayal-Trauma Survey. Journal of Trauma & Dissociation, 7, 39-63

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<b><i>Specify Name of Ethics Committee</i></b>	<b>Institutional Review Board of Taichung Hospital</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>Yes</b>