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TOLTERODINE TARTRATE (DETROL LA) CAN REDUCE THE RISK OF URGENT URINARY INCONTINENCE (UUI) AFTER THE HOLEP SURGERY OF BENIGN PROSTATIC HYPERPLASIA (BPH)

Hypothesis / aims of study

To assess whether Tolterodine Tartrate (Detrol LA) can reduce the risk of urgent urinary incontinence after Holmium enucleation of the prostate (HOLEP).

Study design, materials and methods

357 consecutive BPH patients undergoing HOLEP were enrolled in study. After the surgeries, patients were randomized into two groups. One group (178 cases) of patients took Tolterodine Tartrate Extended Release Capsule 4mg every night. Another group (179 cases) took placebo. Complications as bladder spasm, secondary bleeding, and urgent urinary incontinence were noted.

Results

The baseline data between two groups was similar. After surgery, bladder spasm occurred in 12 cases (6.7%) of Tolterodine group while in 25 cases (13.9%) in placebo group. Secondary bleeding was seen 9 cases (5.5%) in Tolterodine group vs.13 cases (7.3%) in placebo group. After removal of the catheters, urgent urinary incontinence occurred in 15 cases (8.4%) of Tolterodine group, while 35 cases (19.5%) in placebo group.

Interpretation of results

Bladder overactivity may result in UUI after surgical treatment of BPH that were led by M-receptors II & III in the bladder while Tolterodine could hinder this overactivity by blocking the receptors.

Concluding message

Tolterodine Tartrate (Detrol LA) could effectively reduce the complications which ascribed to over active bladder after the HOLEP treatment of Benign Prostatic Hyperplasia (BPH).

Disclosures

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