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EFFICACY OF SOLIFENACIN IN TREATMENT OF CYSTOSPASM CAUSED BY INDWELLING CATHETER AFTER TRANSURETHRAL RESECTION OF BLADDER TUMOR

Hypothesis / aims of study

To assess the efficacy of solifenacin in treatment of cystospasm caused by indwelling catheter after transurethral resection of bladder tumor.

Study design, materials and methods

A single-blind, controlled and randomized method was adopted. 126 cases were included and were randomly divided into the trial group (65 cases) and control group (61 cases). Patients in trial group were administered with diclofenac sodium suppositories in anus at 50mg and solifenacin by mouth at 5mg once daily for a week. Patients in the control group were administered only with diclofenac sodium suppositories in anus at 50mg once daily for a week. The efficacy of solifenacin was assessed by the frequency and duration of cystospasm attack in every 24 hours.

Results

There are significant differences in the frequency and duration of cystospasm attack in every 24 hours between the trial group and the control group respectively ($p < 0.05$).

Interpretation of results

Solifenacin can effectively relieve the cystospasm caused by indwelling catheter after transurethral resection of bladder tumor.

Concluding message

transurethral resection of bladder tumor (TURBT); indwelling catheter; cystospasm; solifenacin

References

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Disclosures

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