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499

Abstract Reproduction Form B-1

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Title (type in CAPITAL LETTERS)	USE OF A PSYCOMETRIC SCALE IN CHRONIC IDIOPATHIC URINARY RETENTION UNDERGOING PERMENENT IMPLANT OF SACRAL ROOT NEUROMODULATION

<u>Aim of Study:</u> The use of permanent, continuous or intermittent, mono or bilateral neuromodulation of the sacral root represents an effective therapy in cases of chronic retention with no organic obstruction.

Many case studies have been reported as have discussions concerning the rationale underlying this therapy. For many years the cause of urinary retention in women patients has been regarded as a hysterical problem to the extent that it has become defined as "psychogenic urinary retention".

Sacral neuromodulation has produced positive results, in many cases where there had been no response to neuromodulation using intravescical electrostimulation and where there was evidence of electromyographic anomalies of the urethral sphincter with signs of myotonia. The positive response to Sacral Neuromodulation (SNM) demonstrates how this resolves a hyperinhibition of the detrusor originating from the perineal level.

However, even though a positive PNE test result has lead to definitive implant, the long-term follow-up can reveal a reappearance of the symptomatology after varying periods.

Such patients sometimes cannot be sufficiently identified in the diagnostic phase and a psychometric test should be used in all cases. Our aim was to demonstrate that this psychometric test is a useful diagnostic tool for deciding on patient suitability for permanent implant of SNM.

<u>Materials and methods</u>: In the ambit of the work carried out by our Group, we conducted the preliminary phase in a pilot center with the aim of assessing the best psychometric test to use. The study involved 15 patients who underwent MMPI-2TM, Somatofom Disorder Sreener (SDS) and a psychological interview. Because of the significant results from the MMPI-2TM, we singled out this test for use in other centers.

At this point, each urologist followed his own therapeutic treatment unaware of the test analysis conducted by the same psychologist in all centers. A total of 26 patients from all centers who suffered from complete chronic urinary retention completed the MMPI-2[™] test after a positive PNE test result, in 21 cases before implant and in 5 cases immediately after. At present 21 patients have definitive implant.

The psychologist interpreted the test by subdividing the results into the following 3 categories:

0 - Normal; 1 - Symptoms as reactions to the organic disease; 2 - Clinical results of a psychiatric diagnosis

<u>Results</u>

According to this subdivision the following results are revealed:

cat. 0	9pts
cat. 1	5pts
cat. 2	6pts
not measurable	1pt

14

Ref. No. (Page 2) 499

Abstract Reproduction Form B-2

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Results of SNM and MMPI-2™ are as following:

		887738666767777777777777777777	
MMPI-2 ™ results			
0	8	1	0
1	4	1	0
2	1	0	4

p(chi²)=0.005

Follow-ups were conducted at periods varying from 4 to 42 months (mean 12.5 months) and the comparison of therapy success data with the psychometric test results produced the following results:

4 patients in whom therapy failed within 4 months from implant all belonged to category 2. Of the remaining 2 patients in this category 1, whose implant had to be rechecked, at present does not use the therapy because of pregnancy and the other continues to derive benefit even though the follow-up is short (4 months).

No problems have been recorded with patients in category 0 or those 5 patients in category 1 with only 1 patient in the latter producing results of 50% at 9 months follow-up.

<u>Conclusions</u>: After a preliminary assessment in the pilot center and its extension to the other, we are able to state that this test can be usefully implemented in the diagnostic phase in order to decide on patient eligibility for permanent implant.