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International Continence Society

August 22-26, 1999

Category No.

29th Annual Meeting
Video

Denver, Colorado USA

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Abstract Reproduction Form B-1

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Title (type in CAPITAL LETTERS)	CYSTISTAT® FOR THE TREATMENT OF INTERSTITIAL CYSTITIS (IC). AN OPEN, UNCONTROLLED CLINICAL STUDY ON TREATMENT OF INTERSTITIAL CYSTITIS WITH A HYALURONIC ACID PRODUCT.

The aim of the study was to evaluate if therapy with a product of hyaluronic acid (Cystistat) was able to affect urinary frequency and pain in IC/PBD patients.

A total of 20 patients (all women) were included in the study of whom 16 had been diagnosed with having IC (interstitial cystitis) and 4 with having PBD (painful bladder disease)

Inclusion criteria:

symptomatic PBD or IC for at least 12 months.

PBD were defined as:

- pain in relation to bladder filling, relieved by urination
- nucturia at least x 2
- frequency, defined by at least 5 urinations during 12 hours
- sterile urine

IC was further defined as:

- mastocytosis: a minimum of 28 mastcells per squaremm in the detrusor muscles and the finding of petecchiae at bladder distension.

METHODS: Intravesical instillation of 40 mg hyaluronic acid diluted in normal saline to a volume of 50 ml at day 0, 7, 14, and 21, month 2 and 3. Follow-up: 6-9 month and 12 month following day 0.

<u>RESULTS</u>: Efficacy of Cystistat treatment was determined by the following parameters: urinary frequency during the daytime, nocturia, use of analgesics (mild and strong), and pain (visual analog scales, VAS).

After 3 months there was a decrease in urinary frequency during daytime from 11,9 to 11,0 times a day, and a decrease in frequency during the night from 4,5 to 3,3 times a night. Patients intake of mild analgesics was reduced from 1,7 (measured as number of times they have taken mild analgesics) to 1,0 times a day after 3 months. There was no change



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Abstract Reproduction Form B-2

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Author(s):	Else Kallestrup, Steinunn Jørgensen Tage Hald
	e use of strong analgesics during the study, but very few of the patients actually used ng analgesics.
using	r three months of treatment there was a marked reduction of pain when measured g a visual analog scale as a self reporting tool by the patient. The average shows a rease from 46,9 to 33,3 determined as mm on a VAS.
CON cysti	NCLUSION: Cystistat® reduces urinary frequency and pain in patients with interstitial itis.