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Authors: H.H. Woo, H.M. Scarpero, and J.C. Winters

Institution: Ochsner Clinic

Title: THE URODYNAMIC FINDINGS IN MEN WITH LOWER URINARY TRACT SYMPTOMS

REFRACTORY TO ALPHA BLOCKERS

Aims of Study:

Reports on urodynamic findings in the specific population of men with refractory LUTS despite medical therapy with alpha-blockers is rare. Our objective is to determine the urodynamic findings in men with lower urinary tract

symptoms (LUTS) not responding to alpha-blocker therapy.

Methods:

93 patients with persistent LUTS despite treatment for at least 2 months with alpha-blockers underwent multi-channel urodynamics (UDS). The minimum doses of alpha-blockers required for study entry were: Cardura 4mg,

Hytrin 5mg, and Flomax 0.4mg. Maximum detrusor pressure (Pdet) and maximum urinary flow rate (Qmax) were recorded

for each patient. Patients were classified into three groups by pressure-flow (P-Q) data: Obstructed (Pdet \geq 40; Qmax \leq 12),

Equivocal (Pdet 30-39; Qmax < 12) and Unobstructed (Pdet < 29; Q max < 12).

Results:

20/93 patients with prostate cancer or following prostatectomy were excluded. 73 patients met the study criteria.

The average age was 68.7 yr. (42-88). Seventeen patients had diabetes (DM), and 14 had a history of neurologic disorder

(NGB). Fifty-one (54.8%) patients were obstructed, 4 (4.4%) had urodynamic criteria equivocal for obstruction,

and 18(20.5%) were not obstructed. 9/22 (40.9%) patients without a UDS diagnosis of obstruction had DM or NGB

compared to 22/51 (43.1%) with a UDS diagnosis of obstruction (p=0.90).

Conclusions:

The most prevalent UDS finding in these patients is bladder outlet obstruction. The incidence of non-obstructive urodynamic findings are similar to previous urodynamic investigations in men with LUTS.

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