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Title: Striking Differences in Clinical Characteristics Between Classic and Nonulcer Interstitial Cystitis.

Aims of Study:

Interstitial cystitis (IC) is one of the most bothersome conditions in urological practice. Accumulated evidence indicates that IC is a heterogeneous syndrome and, today, IC is frequently subdivided into classic (ulcerous) and nonulcer disease. Compared to classic IC, the nonulcer type of IC appears different concerning demographic, endoscopic and histological findings, as well as the response to all forms of treatment. However, in clinical series, subdivision is not always performed, a fact that makes it difficult to assess conclusions from these papers. The objective of the present study was to disclose as to whether there are additional dissimilarities in clinical presentation between the two subtypes of IC.

Material and methods:

Our clinical material on IC patients, encompassing 220 subjects (129 classic and 99 nonulcer) diagnosed according to the NIDDK criteria, was studied by surveying the clinical records including micturition diaries.

Results:

Patients with nonulcer disease were younger at the time of diagnosis ($p < 0.0001$) and at the time of symptom onset. Furthermore, there was a marked and significant difference in bladder capacity during general anaesthesia ($p < 0.0001$).

Conclusions:

The findings in the present series, together with previous findings, clearly demonstrates that the two subtypes of IC represent separate entities. We suggest a change in the NIH/NIDDK criteria including a requirement that subtyping of IC is considered mandatory, hence ensuring that the two subtypes are evaluated separately in clinical studies.