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TRANSDERMAL OXYBUTYNIN FOR OVERACTIVE BLADDER: SATISFACTION AND PERCEIVED EFFECTIVENESS

Hypothesis / aims of study

The Multicenter Assessment of Transdermal Therapy in Overactive Bladder with Oxybutynin (MATRIX) study examined the safety and effectiveness of the oxybutynin transdermal system (OXY-TDS) in a community-based population of adults with overactive bladder (OAB) [1]. In this analysis, we describe participant perceptions of OXY-TDS and of their OAB condition during the MATRIX study.

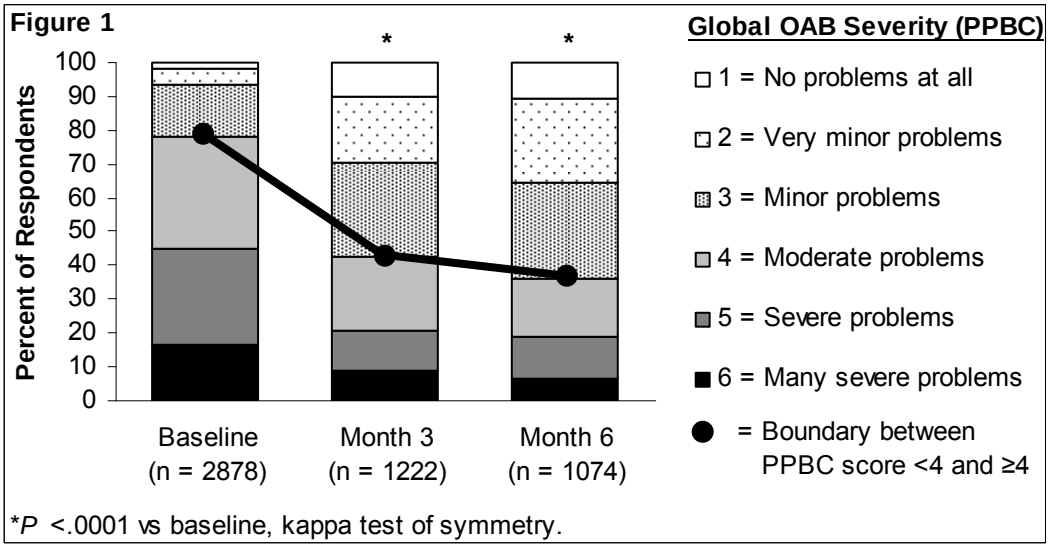
Study design, materials and methods

This 6-month, open-label study at 327 US centres included individuals ≥18 years old with symptoms of OAB. Study participants were treated with OXY-TDS 3.9 mg/day (patch changed twice weekly). Global OAB severity was self-assessed with the Patient Perception of Bladder Condition (PPBC), which was administered at a baseline clinic visit and during monthly computer-assisted telephone interviews (CATIs) [2]. Perceptions of OXY-TDS were recorded during the same CATI calls; respondents previously treated for OAB were also asked to compare OXY-TDS with prior therapies.

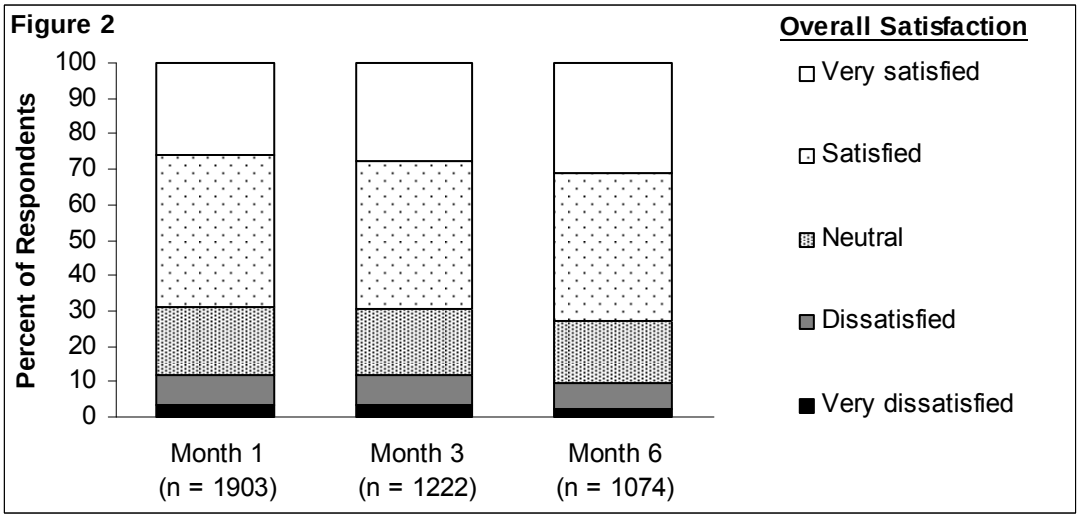
Results

The study population (N = 2878) was mostly female (n = 2508; 87.2%) and Caucasian (n = 2406; 83.6%). The mean age was 62.5 ± 14.8 years (range, 18–100 y).

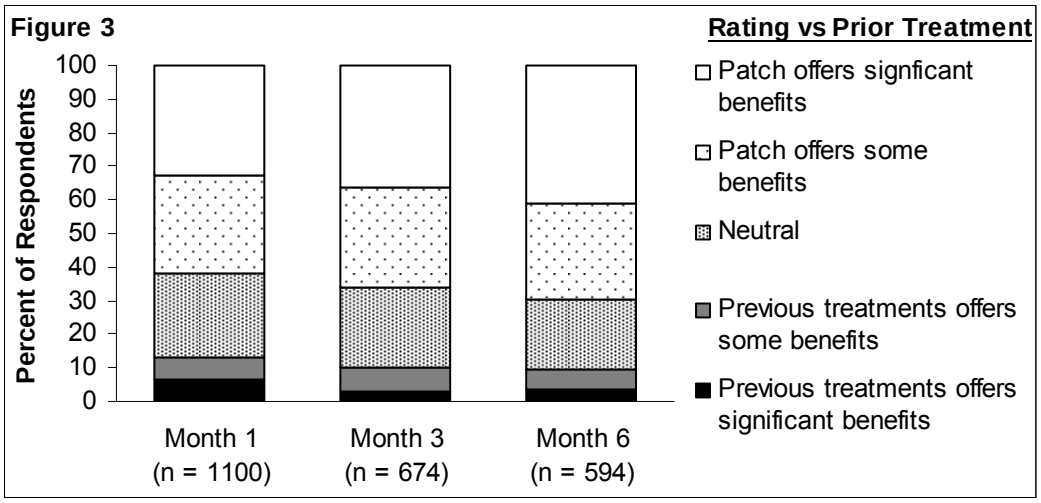
Global OAB severity at baseline was moderate or worse (PPBC score ≥4) in 78.2% of respondents **(Figure 1)**. The fraction reporting moderate or worse OAB severity decreased to 42.8% by month 3 and to 36.3% by month 6 (both $P < .0001$ vs baseline).



Overall satisfaction with OXY-TDS at month 1 was 68.7% (“satisfied” or “very satisfied”) and increased slightly by month 3 (69.4%) and month 6 (73.1%) **(Figure 2)**. Similar satisfaction levels were seen at months 1, 3, and 6 for ease of application (78.8%, 80.3%, and 83.1%), effectiveness (61.9%, 68.3%, and 72.3%), and ability to tolerate (80.5%, 76.9%, and 79.8%).



The patch was considered “convenient” or “very convenient” by most respondents at month 1 (75.3%), month 3 (76.3%), and month 6 (77.9%). During daily activities, most respondents were not aware of the patch (66.0%, 64.9%, and 72.3% at months 1, 3, and 6). Among those who were aware of the patch, it rarely affected daily activities (“never” or “infrequently,” 70.1%, 60.6%, and 61.3% at months 1, 3, and 6). Compared with prior treatments for OAB, OXY-TDS was reported by most respondents to offer “some benefits” or “significant benefits” at month 1 (62.3%), month 3 (66.1%), and month 6 (69.8%) **(Figure 3)**. Similar results were attained at months 1, 3, and 6 for ease of application (67.0%, 71.1%, and 70.3%), effectiveness (57.2%, 61.8%, and 63.0%), and ability to tolerate (60.3%, 60.8%, and 62.6%).



Interpretation of results

Self-reported global OAB severity improved steadily during this 6-month study. Perceptions of OXY-TDS were favourable and stable during treatment. This is consistent with observed correlation between treatment satisfaction and overall perceived improvement in urinary incontinence [3].

Concluding message

Perceived OAB severity decreased significantly during the study. Most participants were satisfied with OXY-TDS throughout the treatment period. OXY-TDS was considered superior to other therapies by most of those previously treated for OAB.

References

[1] BJU Int (2007) 99; 836-844.
[2] Eur Urol (2006) 49; 1079-1086.
[3] Neurourol Urodyn (2006) 25; 411-417.

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HUMAN SUBJECTS: This study was approved by the The protocol and supporting documents were approved by the institutional review board at each participating site. and followed the Declaration of Helsinki Informed consent was obtained from the patients.