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# THE INFLUENCE OF INSOMNIA IN THE TREATMENT FOR NOCTURIA.

# Hypothesis / aims of study

Insomnia may result in nocturia and nocturia may cause insomnia. Since nocturia causes insomnia, and vice versa, the patients nocturia and/or insomnia may be treated in inappropriate way. The aim of this study is to clarify prevalence of nocturia and insomnia, and their correlation in Urological clinics irrelevant to their purpose of visit, and to achieve appropriate treatment strategy.

# Study design, materials and methods

The 2000 patients who visited department of Urology of our University Hospital were subjected to this study. We conducted a survey in the form of 4 types of questionnaires, Athens Insomnia Scale (AIS), IPSS, OABSS and ICIQ-SF for female patients.

#### Results

The presence of nocturia was correlated with higher age, and patients with insomnia, more likely had nocturia (X2test, p<0.0001). And the presence of nocturia was correlated with total IPSS score and total OABSS score too. Twenty percent, however, those who had insomnia and noctria revealed lower total score of IPSS, less than 8 and not fulfilling criteria of overactive bladder either.

## Interpretation of results

There were twenty percent patients those who had both insomnia and nocturia revealed weak symptom of LUTS and OAB. The selected patients in this category should be treated with a sleeping drug primarily, if nocturnal polyuria was denied.

#### Concluding message

The patients complaining nocturia might have insomnia as a primary problem, which may be clarified with careful interview and/or questioner. This endeavor elicits treatment of insomnia for subgroup of patients with nocturia and insomnia.

# References

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Is this a clinical trial?	No
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Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes