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Jang H[1], Seo J[1], Kim T[2], Woo S[3], Jung W[4], Jo S[5], Lee S[6], Shin K[7]
1. Dept. of Urology, Daejeon Veterans Hospital, Daejeon, 2. Dept. of Urology, Konkuk University College of Medicine, Chungju, 3. Dept. of Urology, Eulji University School of Medicine, Daejeon, 4. Dept. of Urology, St. Mary's Hospital, Cheongju, 5. Dept. of Urology, St.Mary's Hospital, Cheongju, 6. Dept. of Urology, Cheongju Medical Center, Cheongju, 7. Dept. of Urology, Gongju Medical Center, Gongju

THE CORRELATION OF INTERNATIONAL PROSTATE SYMPTOM SCORE(IPSS) AND IPSS QUALITY-OF-LIFE(QOL) IN KOREAN PATIENTS WITH BENIGN PROSTATE HYPERPLASIA(BPH)

Hypothesis / aims of study

The International Prostate Symptom Score(IPSS) is the most commonly used scoring system to quantify the lower urinary tract symptoms of Benign Prostate Hyperplasia(BPH). We investigated whether is the correlation of IPSS and IPSS Quality of Life(QOL) and which factors are most bothersome to patients with BPH.

Study design, materials and methods

The total 1104 patients with symptomatic BPH were evaluated. IPSS and IPSS-QOL assessment score were used for assessment of symptoms and symptom-specific QOL of the patients with BPH. We analyzed the correlation of symptom-specific QOL and other variables. Statistical analyses were performed using simple linear regression analysis and stepwise linear regression analysis.

Results

Table 1. Characteristics of patients and variables (N=1104)

	Mean	SD
Age	63.134	9.436
IPSS		
Individual scores		
Emptying	2.701	1.796
Frequency	2.367	1.718
Intermittency	2.013	1.756
Urgency	2.176	2.453
Weak stream	2.519	1.842
Hesitancy	2.233	1.607
Nocturia	2.369	1.718
Subsores		
Filling subscore (aver.)	2.304	1.464
Voiding subscore (aver.)	2.366	1.316
Total score (aver.)	2.340	1.255
QOL score	3.511	1.423

Table 2. Stepwise linear regression model for symptom-specific quality of life (QOL) individual scores

Symptom-specific quality of life (QOL)		
	Coefficient	F-value
Constant	1.468	21.559
Emptying	0.184	8.557
Frequency	0.182	7.843
Intermittency	0.096	4.493
Urgency	0.022	1.579
Weak stream	0.127	6.129
Hesitancy	0.162	7.482
Nocturia	0.081	3.474
P-value	<0.001	
r^2	0.533	

Table 3. Stepwise linear regression model for symptom-specific quality of life (QOL) subscores

Symptom-specific quality of life (QOL)		
	Coefficient	F-value
Constant	1.556	24.060
Filling subscore	0.237	8.614

Voiding subscore	0.596	19.482
P-value	<0.001	
r^2	0.516	

Interpretation of results
Symptom-specific QOL scores had correlation with IPSS (P<0.001). The voiding symptom subscore had a greater impact on symptom-specific QOL (P<0.001). In order of emptying, frequency and hesitancy, symptom-specific QOL significantly decreased (P<0.001).

Concluding message
Symptom-specific QOL scores was the correlation of IPSS score, especially in relation to the emptying and voiding symptom subscore. Therefore, for improvement of symptom-specific QOL, we should be consider this correlation in the treatment of BPH patients.

References
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