# LOWER TRACT URINARY SYMPTOMS IN PATIENTS WITH UTERINE MYOMAS

## Hypothesis / aims of study

To study the prevalence and risk factors of the overactive bladder, urinary incontinence and other lower tract urinary symptoms in patients with uterine myomas.

## Study design, materials and methods

Female patients with established diagnosis of the uterine myomas presenting to gynecology clinic were invited to answer a selfadministered questionnaire. It included validated questionnaire on evidence of lower urinary tract symptoms (modified Overactive Bladder-Validated 8-question Screener [OAB-V8]). Demographic data, relevant medical and surgical history, and pelvic ultrasound findings were reviewed from the patients charts. Statistical significance of relationship between overactive bladder (OAB), stress incontinence and urge incontinence in relation to body mass index (BMI), uterine volume and size of dominant myoma were analyzed using 2-taild exact Fisher test and Wilcoxon test. (Table 1)

### Results

98 patients completed the questionnaire over the period of 3 months. Table 2 presents the characteristics of the participants. Patients ranged from 28 to 81 yeras, and the majority were premenopausal (87 out of 98;87.7%). 74.4% patients had 3 and more detected myomas on the ultrasound, with the size of the dominant uterine myoma more than 6cm in 41 out of 98 (41%) cases. (Table 3)

OAB was present in 47 out of (98) 47.95 % women. No significant statistical relation between size and volume of the uterus and overactive bladder, urge incontinence, stress incontinence and mixed incontinence was noted (Table 4). Observation of OAB subtypes with urge and stress incontinence in premenopausal patients with uterine myomas was statistically significant in comparison with premenopausal women studied in family clinic, (15.3% vs 60% and 6.8% vs 63%) (p<0.001). Overall prevalence of OAB was similar in both groups 53.2% vs 52.8% which have the very similar demographic characteristics.

### Concluding message

Our study showed the higher prevalence of overactive bladder than in general population, however the overall OAB prevalence related to fibroids did not show statistical significance. OAB-stress incontinence and OAB-urge incontinence subtypes were associated with uterine myomas. Interestingly the premenopausal women with uterine myomas tend to have more OAB with urge and stress incontinence.

#### Interpretation of results

Table 3. Prevalence of LUTS and OAB subtypes in all patients with uterine myomas.

#### Table 1. Criteria for LUTS and OAB subtypes

	Identification criteria			
LUTS				
Urgency	Answer ≥1 to any one of the three OAB-V8 questions on urge to urinate			
Frequency	Answer ≥1 to any one of the two OAB-V8 questions on frequent urination			
Nocturia	Answer ≥1 to the OAB-V8 question on nocturia			
Urge urinary incontinence (UUI)	Answer ≥1 to one of the two OAB-V8 questions on urine leakage associated with urge			
Stress urinary incontinence (SUI)	Answer ≥1 to one of the two questions on urine leakage associated with physical activities, sneezing, coughing, or laughing			
Mixed urinary incontinence (MUI)	Meet the criteria for both UUI and SUI described above			
Incomplete emptying	Answer $\geq$ 1 to the question on incomplete emptying			
OAB subtypes (based on presence of above sympt	oms)			
OAB with frequency alone (OAB-F)	OAB-V8 score ≥8 with symptoms of frequency and/or nocturia only			
OAB with urgency without incontinence (OAB- U)	OAB-V8 score ≥8 with symptoms of urgency withou incontinence			
OAB with urge urinary incontinence (OAB-UUI)	OAB-V8 score ≥8 with symptoms of UUI and no SUI			
OAB with stress urinary incontinence (OAB- SUI)	OAB-V8 score ≥8 with symptoms of SUI and no UUI			
OAB with mixed urinary incontinence (OAB- MUI)	OAB-V8 score ≥8 with symptoms of MUI			

LUTS , N(%)	N=98	
Urgency	66 (67.3)	
Frequency	65(66.3)	
Nocturia	74(75.5)	
UUI	34(34.7)	
SUI	50(51.0)	
Incomplete emptying	35(35.7)	
MUI	22(22.4)	
OAB positive N (%)	47(47.9)	
OAB-F	9(19.1)	
OAB-U	0	
OAB -UUI	28(59.5)	
OAB-SUI	29(63.0)	UUI=urge urinary incontinence,
OAB-MUI	18(38.3)	SUI=stress urinary incontinence,
OAB negative N (%)	N=51(52.0)	MUI=mixed urinary incontinence
Urgency	14(27.4)	
Frequency	20(39.2)	
Nocturia	29(56.8)	
UUI	6(11.7)	
SUI	21(21.4	
MUI	4(07.8)	
Incomplete emptying	13(13.2)	

OAB-F = OAB with frequency alone, OAB-U = OAB with urgency without incontinence, OAB-UUI = OAB with urge urinary incontinence, OAB-SUI = OAB with stress urinary OAB-MUI = OAB with mixed urinary incontinence

LUTS = Lower urinary tract symptoms

Characteristic, n (%)	Premeno	pausal	Postme	nopausal	Total (n=	98)
naraotonotio, n (n)		=87)	(n=11)	nopuuoui	rotar (ii-	,
Age, years						
25-34	10	(11.4)			10(10.2)	
35-44	32	(36.7)			32(32.6)	
45-54	45	(51.7)	3	(27.2)	48(48.9)	
55-64		(01.17)	6	(54.5)	6(6.1)	
65-74	-		1	(9.0)	1(1.0)	
≥75			1	(9.0)	1(1.0)	
				(0.0)	.(,	
Race						
Black	84	(96.5)	11	(100)	95(97.9)	
Hispanic	1	(1.0)	-		1(1.0)	
White	-		-		-	
Other / Not stated	2	(2.2)	-		2(2.0)	
Body mass index (BMI), kg/m²						
<24.9	21	(24.1)	0		21(21.4)	
25.0-29.9	26	(29.8)	6(54.5)		32(32.6)	
30-34.9	20	(22.9)	3(27.2)		23(23.4)	
35-39.9	7	(8.0)	0		7(7.1)	
>40	13	(14.9)	2(18.1)		15(15.3)	
listory of smoking* Yes	3	(2.0)			2(2.0)	
		(3.0)			3(3.0)	
No	95	(96.9)	0		95(96.9)	
Parity						
<2	44(50.5)		1(9.0)		45(45.9)	
2-4	38(43.6)		7(63.6)		45(45.9)	
>5						
20	5(5.7)		3(27.2)		8(8.1)	
Previous surgical						
history						
Bladder surgery	0		0			
Urinary leakage	0		0			
C-section	14	(14.2)	0		14	(14.2)
Myomectomy	7	(7.1)	0		7	(7.1)
wyomectomy	'	(7.1)	v		'	(7.1)
Dize of the uterus wks						
8-11	10/21 0		3(27.2)		22	(22.4)
12-14	19(21.8)		3(27.2) 3(27.2)		22	(22.4)
	23(26.4)					(26.5)
15-19	28(32.1)		4(36.3)		32	(32.6)
>20	17(19.5)		1(9.0)		18	(18.3)
Size of dominant uterine ibroids						
	23	(26.4)	3	(27.2)	26(26.5)	
<3cm		(33.3)	3	(27.2)	31(31.6)	
4-5cm	29	(00.0)				
	29 37	(42.5)	3	(27.2)	41(41.8)	
4-5cm >6 cm		• •	3	(27.2)	41(41.8)	
4-5cm >6 cm DAB status	37	(42.5)				(52.0)
4-5cm		• •	3 10 1	(27.2) (90.9) (10.)	41(41.8) 51 47	(52.0) (47.9)

## Table 4a.

	OAB	SUI	UUI	MUI
вмі	p=0.321	p=0.120	p=0.124	p=0.153
Max fibroid size	p=0.101	p=0.516	p=0.941	p=0.727
Volume of the	p=0.580	p=0.310	p=0.275	p=0.175

Table 4b. Prevalence of the OAB subtypes in premenopausal patients in family medicine

clinic and in patients with leiomyoma.

n (%)		Premenopause (n=111)	Premenopause with Uterine myomas (n=87)	p value
OAB positive		59 (53.2)	46 (52.8)	1.0
OAB subtypes				
OAB-F		2(03.4)	9 (19.5)	.011
OAB-U		6(10.2)	0	.035
OAB-UUI		9(15.3)	28(60.8)	<.001
OAB-SUI		4(06.8)	29(63.0)	<.001
OAB-MUI		38(64.4)	18 (39.1)	.887
OAB incontinence	with	51(86.4)	38 (82.6)	.597

Specify source of funding or grant	none
Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	SUNY Downstate Medical School institutional IRB
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes