

## TREATMENT OF URETHRAL PAIN SYNDROME WITH EXTRA POTENT CORTICOSTEROID AND LIDOCAINE.

### Hypothesis / aims of study

Urethral pain syndrome (UPS) is the occurrence of recurrent episodic urethral pain usually on voiding, with daytime frequency and nocturia, in the absence of proven infection or other obvious pathology. This syndrome is difficult to treat and despite a wide variety of treatment in use, no consensus on optimal treatment has been reached. Histological studies have shown that the urethral mucosa displays inflammatory changes in patients with UPS. Treatment with instillation of extra potent steroid (clobetasol) into the urethra followed by lidocaine was tried at a gynaecological clinic with good results. The clobetasol is thought to strongly reduce the urethral inflammation and the patient's symptoms. The primary effect of the lidocaine is to diminish brief clobetasol-induced urethral pain, but it may also contribute to inhibiting pain. This study is a retrospective quality control study to evaluate the effects of this treatment. Prior to the evaluation a questionnaire was sent to 21 gynaecological and 9 urological clinics in different Swedish public hospitals to inquire what treatments were used for UPS. Ninety per cent of the clinics responded and at that time, 2006, none of them was using potent or extra potent corticosteroids.

### Study design, materials and methods

This is a retrospective study of treatment given between 1999 and 2006 at the Ventrums Gynaecological Private Clinic in Bjursås, Sweden. Thirty consecutive women with UPS were treated with instillation of 2 ml clobetasol cream (Dermovate®) and 2 ml lidocaine (Xylocain®) gel in the urethra. The treatment was carried out 1 to 2 times the first week and then once a week until the symptoms were cured or relieved. The number of treatments and their effect on symptoms (cured, better, worse or unchanged) up to the time of the patient's final treatment was scored. After the final treatment there was a follow-up time of 6 months.

### Results

The number of treatments per patient was between 1 and 15, with a median of 2. After their final instillation 60 % of the patients were cured and the remainder were improved. None of the patients reported that their symptoms had worsened or remained unchanged after their complete series of treatment. At follow-up 6 months after the last treatment 5 patients (16 %) had relapsed. Apart from transient urethral pain caused by the clobetasol instillation, and alleviated by the lidocaine gel, no side effects of the treatment were noted.

### Interpretation of results

Instillation of extra potent corticosteroid into the urethra once a week until recovery occurred showed good results in this study. Addition of lidocaine was also used to relieve the transient pain caused by the corticosteroid. We believe that the results are the effect of the corticosteroid on inflamed urethral tissue. A treatment effect of lidocaine on the UPS cannot be ruled out.

### Concluding message

Instillation of extra potent corticosteroid (clobetasol) into the urethra resulted in a good treatment response in the studied patients. Further evaluation of this mode of treatment is needed in prospective, randomized and double-blind studies.

<b><i>Specify source of funding or grant</i></b>	<b>No funding, no grant</b>
<b><i>Is this a clinical trial?</i></b>	<b>No</b>
<b><i>What were the subjects in the study?</i></b>	<b>HUMAN</b>
<b><i>Was this study approved by an ethics committee?</i></b>	<b>No</b>
<b><i>This study did not require ethics committee approval because</i></b>	<b>I started to try this treatment of UPS in 1998 on a few patients and it showed very good results. From 1999 I treated patient consecutively after informed consent to try a extra potent corticosteroid treatment not known to be used before. In 2006 I had 30 patients treated with good results. Results of this treatment has, to my knowledge, not been published or used. We did a retrospective quality control study after informed consent from the patients, for treatment and for publication..</b>
<b><i>Was the Declaration of Helsinki followed?</i></b>	<b>Yes</b>
<b><i>Was informed consent obtained from the patients?</i></b>	<b>Yes</b>