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URGENCY IS RELATED TO SEXUAL WELL-BEING IN JAPANESE WOMEN.

Hypothesis / aims of study

Female lower urinary tract symptoms (LUTS) affect quality of life and sexual activity. This study aimed to evaluate the influences of LUTS on sexual well-being in Japanese women, as little is known on this topic.

Study design, materials and methods

We investigated 514 women recruited between August 6 and August 17, 2007, from the outpatient departments (except the departments of pediatrics, psychiatry and ophthalmology) at our hospital, regardless of the reason for visiting.

All participants were asked to answer a standardized self-reported questionnaire. Using the International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF) and the overactive bladder symptom score (OABSS) [1], we evaluated urinary symptoms, including stress urinary incontinence, urgency, day time frequency, and nocturia.

To assess satisfaction with sexual function, we asked the question "If you were to spend the rest of your life with your sexual function the way it is today, how would you feel about this?", with answer choices of "very satisfied", "somewhat satisfied", "neither satisfied nor dissatisfied", "somewhat dissatisfied" and "very dissatisfied", from part of a questionnaire from the Global Study of Sexual Attitudes and Behaviors (GSSAB) study [2]. The top two categories for each aspect were collapsed to identify positive answers as being very or somewhat satisfied with the level of sexual function.

We analyzed relationships between dissatisfaction with sexual function and other variables, including age, stress urinary incontinence, urgency (≥ once a day), daytime frequency (≥8 times/day), and nocturia (≥ once a night). The chi-square test and logistic regression models were used for statistical analyses. Values of $P<0.05$ were considered statistically significant.

Results

A total of 360 individuals completed the questionnaire (response rate, 70.0%). The mean (±standard deviation) age of respondents was 48.3 ± 13.2 years.

Prevalences of stress urinary incontinence, urgency, daytime frequency, and nocturia were 35.4%, 3.1%, 39.6%, and 55.0%, respectively. Overall, the prevalence of dissatisfaction with sexual function was 55.4%.

In univariate analysis, age, urgency, and nocturia were associated with dissatisfaction with sexual function (Table 1).

In multivariate analysis, a significant correlation was found between dissatisfaction with sexual function and both age (odds ratio (OR), 1.05; $p<0.001$) and urgency (OR, 9.19; $p=0.047$) (Table 1).

Interpretation of results

Age and urgency showed significant correlations with dissatisfaction with sexual function among Japanese women in this study. A few studies have found that OAB is highly associated with female sexual dysfunction [3]. Mechanisms possibly underlying the link between urgency and female sexual dysfunction include autonomic hyperactivity or secondary effects associated with metabolic syndrome, but whether a single common underlying mechanism is present remains unclear. This study could not clarify which domain of sexual function (sexual activity, dyspareunia, libido, arousal/lubrication, and orgasm) correlate with urgency. Further research is required on this point.

Concluding message

Our study confirmed age and urgency as independent risk factors for dissatisfaction with sexual function. These results suggest that urgency can offer a predictor of sexual dysfunction among Japanese women.

Table 1. Correlations between dissatisfaction with sexual function and other variables

	Univariate *P*	Multivariate *P*	Odds ratio (95%CI)
Age (years)	<0.001	<0.001	1.05 (1.03-1.07)
Stress urinary incontinence	0.318	0.803	0.95 (0.60-1.53)
Urgency (≥ once a day)	0.031	0.047	9.19 (1.03-81.7)
Daytime frequency (≥8 times/day)	0.586	0.555	0.87 (0.54-1.40)
Nocturia (≥ once a night)	0.005	0.136	1.43 (0.89-2.23)

References

1. Homma, Urology, 68:318, 2006
2. Laumann, Int J Impot Res, 17:39, 2005
3. Kim, Int J Impot Res, 17:158, 2005

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What were the subjects in the study?	**HUMAN**
Was this study approved by an ethics committee?	**Yes**

Specify Name of Ethics Committee	**The Ethical Committee of The University of Fukui**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**