762

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VARIOUS FINDINGS OF URODYNAMIC STUDY IN PATIENTS WITH CEREBROVASCULAR ACCIDENT

Hypothesis / aims of study
To compare the clinical efficacy between tamsulosin versus tamsulosin plus solifenacin in chronic pelvic pain syndrome (CPPS) patient.

Study design, materials and methods
From October 2010 to February 2011, 40 CPPS patients were enrolled under the approval of a relevant ethics committee. After routine initial baseline studies, the patients were randomly placed into Group I (tamsulosin 0.2mg once daily) and Group II (tamsulosin 0.2mg once daily and solifenacin 5mg once daily) at the visit 1. For all the patients, the National Institute of Health-Chronic Prostatitis Symptom Index (NIHCPSI) were performed at the initial visit. Both group were given medication for 12 weeks and the change in the NIH-CPSI domain scores (pain, voiding symptom,quality of life) were analyzed at 2, 12 weeks.

Results
34 patients were finally enrolled (17 Group I partient and 17 Group II). Initial NIH-CPSI domain scores (pain, voiding symptom, quality of life) showed no differences in Group I versus Group II (11.2 vs 10.9 , 4.8 vs 4.5, 8.3 vs 7.9). The changes in the NIH-CPSI domains (pain, voiding symptom, quality of life) at visit 2 in Group I versus Group II were 1.9 vs -2.0, -0.8 vs -1.3, -1.2 vs -1.5 and Group II showed significant improvement in the voiding symptom NIH-CPSI domain score. The changes in the NIH-CPSI domains (pain, voiding symptom, quality of life) at visit 3 in Group I versus Group II were -2.0 vs -2.2, -0.9 vs -1.5, -1.3 vs -1.8 and Group II showed significant improvement in the voiding symptom and the quality of life NIH-CPSI domain scores.

Interpretation of results
Our data suggests that combination therapy of antichloinergics plus alpha-blocker would be more effective than alpha-blocker monotheraphy for treating patients with chronic prostatitis/chronic pelvic pain syndrome especially for the control of voiding symptom and for the improvement in quality of life

Concluding message
Thus, we recommend combination therapy of antichloinergics plus alpha-blocker for patients with chronic prostatitis/chronic pelvic pain syndrome.

Specify source of funding or grant	**KYUH**
Is this a clinical trial?	**Yes**
Is this study registered in a public clinical trials registry?	**No**
Is this a Randomised Controlled Trial (RCT)?	**Yes**
What were the subjects in the study?	**HUMAN**
Was this study approved by an ethics committee?	**Yes**
Specify Name of Ethics Committee	**KYUH Ethics Committee**
Was the Declaration of Helsinki followed?	**Yes**
Was informed consent obtained from the patients?	**Yes**