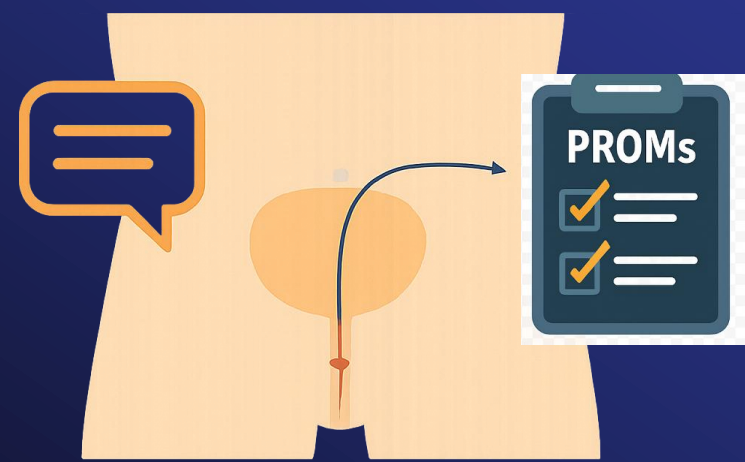


PROMs for Urethral Strictures: Initial Steps Towards a Dutch Version of the Patient Co-constructed Urethral Stricture Symptom and Impact Measure (USSIM)



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INTRODUCTION

- Patient Reported Outcome Measures (PROMs) have an increasing role in evaluating therapeutic outcomes
- Urethral Stricture Symptom and Impact Measure (USSIM) is a PROM co-constructed with patients ¹
- This study presents the first steps towards the validation of the Dutch version: **DUSSIM**

METHODS

- Dutch translation of USSIM to DUSSIM using standardized linguistic validation
- Forward-backward translation and expert panel review
- Tested in interviews with:
 - 14 men with urethral strictures (US) median age 56 yrs (22-78)
 - 15 reference men no voiding issues, median age 46 yrs (19-69)
- DUSSIM repeated at 2 weeks (T2) for reproducibility
- Statistics: Wilcoxon Rank Sum & Signed Rank

RESULTS

- Dutch translation required **no major changes**
- **Questions were well understood**
Minor feedback on Q10, Q12; “catheterization” missing
- **Reproducibility confirmed**
No significant differences T0 vs T2
- **Discrimination confirmed**
US vs reference group significantly different (except sexuality & urination in public)

INTERPRETATION

- Patient involvement ensured clarity and relevance
- DUSSIM confirmed **consistency, reproducibility, and discrimination** in first Dutch patients
- Early validation successful, even in small groups

CONCLUSION

- **First Dutch patient co-constructed PROM for urethral strictures now available: DUSSIM**
- Provides foundation for standardized, patient-centered outcome assessment in the Netherlands

Items DUSSIM	Patients T0 vs. Patients T2	Patients vs. Reference Group
1. Als plassen rest van leven zo blijft (If you were to spend the rest of your life urinating this way)		
In de afgelopen 14 dagen, door problemen met plassen: (In the past 14 days, because of my urinary functioning)		
2. Zorgen niet te kunnen plassen (Worried about being unable to pee)		
3. Moeite de straal te richten (Had trouble aiming my urine)		
4. Dag tevoren moeten plannen (Had to plan my day ahead of time)		
5. Zwakke plasstraal (Had a weak urine stream)		
6. Pijn bij het plassen (Felt pain when i peed)		
7. Moeite met plassen (Strained to pee)		
8. Moeite plassen uit te stellen (Had difficulty delaying urination)		
9. Schaamte omdat plassen in het openbaar lang duurde (Felt embarrassed because it took me so long to pee in public)		
DOMAIN SCORE		
In de afgelopen 14 dagen, door seksueel functioneren: (In the past 14 days, because of my sexual functioning)		
10. Klaarkomen niet bevredigend (Orgasm was not satisfying)		
11. Pijn bij het klaarkomen (Felt pain when ejaculated)		
DOMAIN SCORE		
12. Plassen t.o.v. voor de operatie (Urination compared to before surgery)		n.v.t.
TOTAL SCORE		

Patients T0 vs. Patients T2: black = hypothesis confirmed that there is no significant difference between the two time points
Patients vs. Reference Group: black = hypothesis confirmed that there is a significant difference between the two groups, dark gray = almost, light gray = no difference

1. Urethral Stricture Symptom and Impact Measure Validation Study; Bryan B. Voelzke, Todd C. Edwards, Alex J. Vanni, Jeremy B. Myers, Keith Rourke, Bradley A. Erickson, Joshua B. Broghammer, Sean P. Elliott, Jill C. Buckley, Grady Lindekugel, and Benjamin N. Breyer. <https://doi.org/10.1016/j.urolgy.2025.02.027>