

## EFFECTS OF MEDICAL INTERFERED-PELVIC FLOOR MUSCLE TRAINING IN BEHAVIORAL THERAPY AND/OR TOLTERODINE IN FEMALE PATIENTS WITH PRIMARY OVERACTIVE BLADDER SYNDROME: A SINGLE-BLIND RANDOMIZED STUDY

### Hypothesis / aims of study

To determine whether medical interfered-pelvic floor muscle training and behavioral therapy can enhance the treatment effects of tolterodine on female patients with primary overactive bladder (OAB).

### Study design, materials and methods

60 female patients with primary OAB were randomized to treatment with tolterodine extended release tablets (To, 5 mg once daily) or tolterodine combined with medical interfered-pelvic floor muscle training and behavioral therapy (Co) groups for 6 months. Treatment efficacy was measured by micturition diary, Oxford pelvic floor muscle force scores, OABSS scores and patients' subjective KHQ quality of life scores were compared.

### Results

Mean OABSS scores significantly decreased 60.5% and 75.4% respectively in the To and Co groups before and after treatments ( $p < 0.01$ ). The OABSS scores decrease was significantly greater in the Co group than in the To group ( $p < 0.05$ ). Pelvic floor muscle force scores was significantly elevated in Co group than in To group ( $P < 0.01$ ). Significant improvements in all KHQ domains were observed ( $P < 0.05$ ). Subjects aged  $< 45$  years had significantly greater improvement in the Personal Relationships domain compared with those aged 45-64 years ( $P < 0.05$ ) and in the Sleep/Energy domain compared with all other groups (all  $P < 0.02$ ). Although To and their combination were all effective in controlling OAB symptoms, combination therapy was more effective than either method alone.

### Interpretation of results

In addition to antimuscarinic therapy, treatment satisfaction and OAB symptoms may be improved in many patients by using behavioral interventions and bladder training, especially strategies for improving pelvic floor muscle training results.

### Concluding message

Tolterodine alone may be instituted as a first-line therapy, but may be more effective when combined with behavioral interventions mainly on pelvic floor muscle training.

### Disclosures

**Funding:** China Natural Science Foundation, Grant No 30772176 **Clinical Trial:** Yes **Public Registry:** No **RCT:** Yes **Subjects:** HUMAN **Ethics Committee:** ethics committee at the 1st Affiliated Hospital of Zhejiang University, School of Medicine. **Helsinki:** Yes **Informed Consent:** Yes