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EFFICACY OF SOLIFENACIN IN THE TREATMENT OF OVERACTIVE BLADDER AFTER TRANSURETHAL RESECTION OF THE PROSTATE

Hypothesis / aims of study

To evaluate the efficacy and safety of solifenacin in the treatment of overactive bladder(OAB) syndrome in patients who have undergone transurethal resection of the prostate(TURP).

Study design, materials and methods

According to the Overactive Bladder Symptom Score(OABSS), 64 cases with OAB symptoms after TURP were randomly assigned into study and control groups with 32 cases in each group. Patients in the study group were treated with solifenacin (5mg once daily) for a two week period beginning the first day after catheter removal. Patients in the control group were not treated with solifenacin. The mean urgency episodes, micturition episodes, nocturia, urge incontinence, volume voided per micturition, Qmax and OABSS scores were recorded on the 7th and the 14th day after catheter removal. Treatment-emergent adverse events with solifenacin in the study group were recorded and evaluated as well. All cases were followed-up for 8 weeks after catheter removal.

Results

There were statistically significant differences (P<0.01) in favor of study group over control group in the aspect of urgency, micturition episodes, nocturia, urge incontinence, volume voided per micturition and OABSS scores. The incidences of treatment related adverse events were 12.5% (4/32) in the study group with no serious adverse event observed.

Interpretation of results

Solifenacin significantly improve all symptoms of overactive bladder syndrome.

Concluding message

Solifenacin is effective in the treatment of OAB syndrome after TURP and is well tolerated as well. Application of solifenacin should be recommended earlier after TURP.

<u>Disclosures</u>

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