

THE SYMPTOM SCORES CHANGES AND THE PATIENT VS DOCTOR'S SATISFACTION IN WOMEN WITH OVERACTIVE BLADDER(OAB) BEFORE AND AFTER THE ANTIMUSCARINIC TREATMENT.

Hypothesis

Many self-administered questionnaires are used to help in screening OAB, such as the The OAB-v8 (1), OABSS (2) and the questionnaires to measure the patient's quality of life such as the OABq (3). OAB is defined by subjective symptoms, rather than objective measures, so the patient's perspective is important in managing OAB. To evaluate the improvement of the treatment, the follow up of the voiding symptoms are important. The OAB symptoms score may be another way to measure the improvement. And the final goal of the treatment should be adjusted to satisfy the patient's need not just by the doctor's view.

Materials and methods

Forty Thai women attending Urogynecology clinic at an university hospital and diagnosed as having OAB (Symptoms of OAB included: urinary frequency, urgency with or without urge incontinence for ≥ 3 months and at least 1 episode of urgency with or without incontinence in last 3 days) during April 1 to June 30, 2011 were recruited in the study. Tolterodine SR 4 mg orally once a day was given for 4 weeks. The 3 Days voiding diary and the Thai version of OAB questionnaires: OAB-v8, OABSS and OABq (the reliability test studies are already done and are in publication process) were given for self administered before and at the 4th week after the treatment. The patients' satisfaction level decided by patients' own perspectives (0-3, 0= not satisfied, 1 = satisfied, 2= very satisfied, 3= most satisfied) were self answered at 4h week. The doctor's satisfaction level is decided by the author at the 4th week, decided by the voiding diary records improvement before and after without knowing the patients' decisions. The doctor rates the level 0-3: 0: not satisfied= no improvement in any parameter, 1: satisfied= improvement of one parameter or more of voiding diary but less than 50 percent, 2: very satisfied= improvement of one parameter or more of voiding diary more than 50 percent, 3: most satisfied = improvement of all parameters of voiding diary more than 50 percent. The paired students' t- test and the Kruskal-wallis one-Way Analysis of Variance is used for comparison of voiding's diary parameters, symptoms scores, OABq scores. Weighted Kappa coefficients is used to test the agreement of the satisfaction level of both doctor and patients. Sample size calculation is done from pilot study of OAB questionnaire, the OAB-v8 give the highest samples. ($\hat{p} = 7$, $d = 4$, $\alpha = 0.05$, $\text{power} = 0.9$), the 35 subjects are required. The additional 20 per cent (7 cases) are added in case of the loss to follow up.

The aims of this study are 1) To evaluate the voiding symptoms and quality of life scores changes (OAB-v8, OABSS, and OABq) in Thai women before and after antimuscarinic. 2) To evaluate the agreement of the satisfactions of patients and doctor after the treatment.

Results

Table 1 The voiding parameter before and at 4th week (N=40)

	Before	At 4 th week	N	Significant level
Frequency	10.00(5-23)	7.00(4-17)	40	<0.0001
Urge incontinence	2.41 \pm 1.3	0.59 \pm 0.9	17	<0.0001
Urgency episode	4.00(2-18)	1.00(0-9)	40	<0.0001
Night time voiding frequency	2.00(0-5)	1.00(0-3)	40	0.008
Nocturia(night time frequency ≥ 2)	3.00(1-5)	1.00(1-3)	30	0.008

Table 2 Symptoms score and OABq score before and at 4th week (N=40)

	before	At 4 weeks	Significant Level
OABSS	8.9+3.3	4.6+3.4	p=0.006
OABV8	21.4+8.1	9.3+7.2	p=0.027
OABq	101.2+35.9	64.0+30.6	p=0.003

Table 3 Doctor and patients's satisfaction levels (N=40), Weighted Kappa=0.06.

Patients's satisfaction level	Doctor 's satisfaction level			
	0= not satisfied	0= not satisfied	0= not satisfied	0= not satisfied

0= not satisfied	0	0	0	0
1= satisfied	0	4	3	0
2= very satisfied	0	8	10	10
3=most satisfied	0	1	2	2

Interpretation of results

- 1.All voiding parameters, symptoms and OABq score are better at 4 th weeks(Table1-2).
2. The agreement between the satisfaction of patient and doctor are very low as the weighted Kappa is 0.06.

Concluding message

The OAB-v8 and OABSS questionnaires can be used as the screening tool and evaluation of the treatment as the score improvement similar to OAB quality of life score and voiding diary parameter. Setting up the goal of treatment by considering the patients'satisfaction should be evaluated by asking directly with the patient not by the doctor's perspectives

References

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Disclosures

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