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ENDOMETRIOSIS AS A RISK FACTOR OF BLADDER PAIN SYNDROME/INTERSTITIAL CYSTITIS: A RETROSPECTIVE COHORT STUDY

Hypothesis / aims of study

To explore the association between endometriosis and bladder pain syndrome/interstitial cystitis (BPS/IC)

Study design, materials and methods

We identified 9,191 female patients who had received a diagnosis of endometriosis as the study cohort. We randomly selected 27,573 subjects to be included as the comparison cohort. Each patient in this study was individually tracked for a 3-year period to identify those who subsequently received a diagnosis of BPS/IC. Cox proportional hazards regressions were carried out to estimate the 3-year risk of BPS/IC following a diagnosis of endometriosis.

Results

The incidence of BPS/IC following a diagnosis of endometriosis was 0.09% during the follow-up period for all subjects. The incidence rate of BPS/IC was 0.20% at follow-up period in patients with endometriosis, and 0.05% in controls.

Interpretation of results

Cox proportional analysis indicated that the hazard ratio (HR) of BPS/IC for patients with endometriosis was 4.43 (95% CI = 2.13-9.23, P < 0.001) that of controls. The adjusted HR of BPS/IC for patients with endometriosis was 3.74 (95% CI = 1.76-7.94, P < 0.001) after taking age group, urbanization level, and medical comorbidity into consideration.

Concluding message

We found that patients with endometriosis were at a higher risk than with comparison patients for having been subsequently diagnosed with BPS/IC during longitudinal follow-up.

Disclosures

Funding: nil **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** It's a retrospective cohort study **Helsinki:** Yes **Informed Consent:** No