THE EFFICACY OF COMBINATION THERAPY OF ALPHA BLOCKER WITH ANTICHOLINERGIC IN ADULT WOMEN WITH OVERACTIVE BLADDER: A PRELIMINARY STUDY

Hypothesis / aims of study
Overactive Bladder (OAB) is associated with symptoms including urgency, with or without urge incontinence, usually with frequency and nocturia. Anticholinergics are mainly used for the treatment of patients with OAB, especially women. Other than anticholinergics, alpha blockers have been shown in several clinical reports to be useful in treating detrusor overactivity caused by neurological diseases. The aim of the study is to evaluate the efficacy of alpha blocker in combination with anticholinergics to treat women suffering from OAB.

Study design, materials and methods
This prospective study enrolled 60 female patients with OAB. Patients have been randomised into two groups. The interventions for the 12-week treatment period included solifenacin daily for the group 1 and combination of both solifenacin and tamsulosin daily for the group 2. At baseline and 12 weeks after treatment, patients completed a 3-day bladder diary, International Prostate Symptom Score (IPSS), quality of life (QoL) index, Overactive Bladder Symptom Score (OABSS), maximum flow rate (Qmax) and postvoid residual urine volume (PVR).

Results
A total of 60 women were randomised and 54 completed this study (group 1: 29, group 2: 25). Statistically significant improvements in terms of urgency and frequency were observed in both groups at 12 weeks after treatment as compared with baseline (p < 0.03 and < 0.02), while no inter-group difference was observed between the two groups. No significant difference was observed in terms of toxic events between the two groups.

Interpretation of results
There were no significant differences between treatment groups in efficacy or QoL variables. Although group 2 showed improvement of IPSS voiding subscore and Qmax than group 1 but not statistically significant (p=0.15, p=0.07).

Concluding message
The combination of alpha blocker and anticholinergic for 12 weeks was noninferior to anticholinergic alone in efficacy, and there was no evidence of benefit of alpha blocker in treating female OAB. Further studies are needed to assess the role of combined therapy of alpha blocker and anticholinergic in the treatment of female OAB.

References
1. BJUI. 2007;100(4):840-5

Disclosures
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