

EFFECT OF LOW-DOSE TRIPLE THERAPY USING GABAPENTIN, AMITRIPTYLINE, AND A NONSTEROIDAL ANTI-INFLAMMATORY DRUG FOR OVERACTIVE BLADDER SYMPTOMS IN PATIENTS WITH BLADDER PAIN SYNDROME

Hypothesis / aims of study

Patients with bladder pain syndrome/interstitial cystitis (BPS/IC) can have pain as a main symptom and overactive bladder (OAB) symptoms that are directly or indirectly related to a major mechanism that causes pain. The primary purpose of this study is firstly to identify the prevalence rate of OAB symptoms in patients with BPS/IC, secondly to identify changes in OAB symptoms after low-dose triple therapy, and thirdly to build a theoretical foundation to improve quality of life for patients

Study design, materials and methods

Patients who met the inclusion criteria of BPS/IC through basic tests including the O'Leary-Sant symptom index, overactive bladder symptom score (OABSS), and visual analog scale (VAS) were identified. Treatment-based changes in OAB symptoms were identified using the IC Symptom Index and IC Problem Index (ICSI/ICPI), OABSS, and VAS before, and 4 and 12 weeks after low-dose triple therapy

Results

The patients consisted of 3 men and 20 women, and their mean age was 61.9 years (41.0–83.2 years). Comparing values before treatment, and 4 and 12 weeks after treatment (baseline vs. 4 weeks to baseline vs. 12 weeks), the rates of improvement were as follows: ICSI, 44.2% to 63.7%; ICPI, 46.9% to 59.4%; OABSS, 34.3% to 58.2%; and VAS, 53.6% to 75.0%, which showed statistically significant differences ($P<0.05$). However, comparing values at 4 and 12 weeks after treatment (4 weeks vs. 12 weeks), the ICSI and VAS showed a statistically significant decrease ($P<0.05$). The ICPI and OABSS showed slight improvement, but no statistically significant differences ($P>0.05$)

Interpretation of results

According to our findings, when values before treatment and 4 and 12 weeks after treatment were compared, those of the ICSI, ICPI, OABSS, and VAS showed statistically significant improvement ($P<0.05$). However, when values 4 and 12 weeks after low-dose triple therapy were compared, the ICSI and VAS ($P<0.05$) showed contrasting results with the ICPI and OABSS ($P>0.05$).

Concluding message

Low-dose triple therapy in BPS/IC results in a clear decrease in OAB symptoms in the first 4 weeks after treatment, and additional treatment for 8 weeks had a partial effect with varied statistical significances depending on the questionnaires.

References

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Disclosures

Funding: NO **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** Study procedure was approved by the Institutional Review Board at Wonkwang University School of Medicine & Hospital **Helsinki:** Yes **Informed Consent:** No