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DYSFUNCTIONAL VOIDING AND URODYNAMIC CHANGES IN WOMEN WITH BLADDER ENDOMETRIOSIS.

Hypothesis / aims of study

Since urinary abnormalities are not always exactly the same for every woman affected by deep infiltrating endometriosis (DIE), we aim to verify the association of major urinary symptoms and of urodynamic findings with the presence of endometriosis in the bladder, a major structure involved with the micturition.

Study design, materials and methods

Cross-sectional (pre-planned) observational study (Canadian Task Force Classification II-2) including a total of 54 women (aging 15.8 to 52.8y) who were evaluated before undergoing laparoscopy for DIE during preoperative diagnostic routine from June/2011 to August/2013 in Rio de Janeiro, Brazil.

Preoperative diagnostic of DIE was suspected with basis on clinical features and ensured by an experienced radiologist with basis on nuclear magnetic resonance imaging. The associations between dichotomized variables were assessed with the nonparametric Fisher's Exact Test (2-sided).

Results

The prevalence (95% confidence interval) of DIE-lesion in the bladder was 16.7% (95%CI: 7.4-27.8%) whereas the prevalence of urinary symptoms was 34.8% (95%CI: 24.6-46.4%); there was no significant association between DIE-lesion in the bladder and urinary symptoms ($p=.965$). However, presence of DIE-lesion in the bladder was statistically associated with maximum detrusor pressure $<30\text{cmH}_2\text{O}$ (OR=10.5; 95%CI:1.4-76.3; $p=.03$), an asymptomatic variable that reflects bladder hypocontractility.

Interpretation of results

Our results demonstrate that bladder's endometriosis was associated with detrusor's hypocontractility.

Concluding message

Our preliminary findings suggest that preoperative urinary symptoms are independent of presence of endometriosis in the bladder when women are diffusely affected by DIE. Actually, we couldn't exclude the probability of preoperative urinary abnormalities be linked to other pelvic structures because this sample didn't include only cases with bladder endometriosis.

Disclosures

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