CHANGE OF UROFLOWMETRIC PARAMETERS ACCORDING TO VOIDING POSITION FOR BENIGN PROSTATIC HYPERPLASIA PATIENTS USING ALPHA BLOCKERS

Hypothesis / aims of study

We assessed the effect of different voiding posi- tions on uroflowmetric parameters and post-void residual (PVR) urine volume in symptomatic benign prostatic hyperplasia (BPH) patients using alpha blockers.

Study design, materials and methods

The study was performed with 33 BPH patients over 50 years old between June 2013 and August 2013. In total, uroflowmetries were performed in all patients: patients in the sitting position and in the standing position. PVR was measured with transabdominal ultrasonography(bladder scan). Patients receiving alpha adrenergic blockers were included, and this patients were formed according to positions. All patients were done with sitting and standard position.

Results

The mean age, mean prostate size and mean PSA were 68.67 ± 7.07 years, 27.67 ± 9.92 ml, 1.83 ± 1.30 ng/ml, respectively. Average flow rate (Qave) were significantly higher in patients in the sitting position (7.28 ± 3.83 ml/s vs. 6.05 ± 3.00 ml/s, p=0.024), but there were no differences in other uroflowmetric parameters and PVR volume (Qmax: 13.66 ± 6.66 ml/s vs. 12.53 ± 5.96 ml/s, PVR: 49.72 ± 58.14 ml vs. 80.27 ± 103.32 ml, respectively; p > 0.05).

Interpretation of results

Qave values were significantly higher in the sitting position than standard position. Voiding flow rates in the sitting position were significantly better than in the standing position for symptomatic BPH patients.

Concluding message

Although rate may be higher during uroflowmetric evaluation in the sitting position, personal preferences must be taken into account because patient comfort during voiding will affect the flow rates.

Disclosures

Funding: none Clinical Trial: No Subjects: HUMAN Ethics not Req'd: change of uroflowmetric parameter according to position Helsinki not Req'd: change of uroflowmetric parameter according to position Informed Consent: Yes