

CLINICAL IMPLICATIONS OF URGENCY SEVERITY IN ACUTE UNCOMPLICATED CYSTITIS PATIENTS TREATED WITH ANTIBIOTICS

Hypothesis / aims of study

To investigate the urinary urgency and its association with baseline and clinical parameters by Ciprobay treatment.

Study design, materials and methods

Between January 2012 and December 2013, Ciprobay was administered twice daily for 5 days, then baseline clinical parameters and the therapeutic effects were evaluated. Patients were classified into 3 groups according to baseline urgency by the self-reported questionnaire. The primary parameters were baseline symptom severity subcategories of urgency, pain and gross hematuria. Each items of was scored according to a Likert-type response scale, with the severity-related response options being "did not have: 0," "mild:1," "moderate:2" and "severe:3", scores ranging from 0 to 3. Pre- treatment pyuria severity (score <10: 0, 10–19: 1, 20–29: 2, 30–40: 3, 40–50: 4, and >50: 5) and bacterial culture results (positive or negative) were also evaluated. Treatment success or failure was assessed based on the questionnaire at the 7-day follow-up visit. Based on their responses to the question, "Since you last completed this questionnaire, have there been any changes in your urinary tract infection symptoms?", patients were classified into the treatment success (answered "better") or the treatment failure (answered "about the same" or "worse"). The time to symptom improvement were also recorded.

Results

Parameters	Mild group (n=129)	Moderate group (n=57)	Severe group (n=42)
Age	46.31±12.10	46.92± 12.35	45.54± 13.80
Pain	0.69 ± 0.12	0.78 ± 0.22	0.79 ± 0.12
Gross hematuria	0.80 ± 1.11	0.78 ± 0.89	0.91 ±1.08
Pyuria severity	3.05 ± 1.36	2.85±1.16	3.05 ± 1.36
Bacterial culture positivity	93 (72.1%)	40 (70.2%)	29(69.0%)
Symptomatic cure rate	116 (89.9%)	50 (87.7%)	33 (78.6%)†‡
Days to symptom improvement	2.12 ± 1.21	2.64 ± 1.31 *	3.21 ± 1.27 †‡

*: p<0.05, Mild vs Moderate group

† : p<0.05, Moderate vs Severe group

‡ : p<0.05, Mild vs Severe group

Interpretation of results

Baseline urgency severity- "did not have," "mild," were classified mild urgency group (n=129) and others were classified as moderate (n=57) and severe group (n=42).

All the clinical parameters including age, pain, gross hematuria, pyuria severity, bacterial culture positivity showed no differences in the three groups. Meanwhile, symptomatic cure rate was significantly lower in severe urgency group (78.6%) than mild urgency (89.9%) moderate urgency (87.7%) group. Patients with severe urgency patients needed more longer treatment period (3.21 days) than patients with moderate urgency (2.64 days) and mild urgency (2.12 days).

Concluding message

Among the 228 patients, about 43.4% (99 subjects) suffered from moderate to severe urgency. Patients with severe urgency had lower symptomatic cure rate and the more severity in urgency needed longer time to improve the symptom. So, patients with significant urgency severity, we should consider sufficient treatment period and the possibility of symptomatic treatment failure in acute uncomplicated cystitis.

References

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Disclosures

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