

REAL LIFE MANAGEMENT OF FLEXIBLE DOSE TREATMENTS WITH FESOTERODINE AND SOLIFENACIN FOR OVERACTIVE BLADDER PATIENTS

Hypothesis / aims of study

Dose adjustment is a common practice for the treatment of overactive bladder (OAB). We analyzed a group of patients who started the treatment at high or low dose with an antimuscarinic (FESO or SOLI) and maintained (HDM; LDM) it through the end of the study versus those who escalated or decreased dose, in both groups

Study design, materials and methods

Retrospective, multicentric study in patients treated with flexible dose of FESO or SOLI for more than 8 weeks. There were three visits during the study; V-2, (start of the treatment); V-1, follow up visit and V0 or study visit where we recorded dose change, reason for change, benefit and adherence to the treatment. A variety of patient reported outcomes were also analyzed. A comparative and descriptive analysis was performed between the groups who modify the dose and the groups who start and maintained high or low dose.

Results

851 patients were included, of which 566 (66.5%) started on FESO and 262 (30.8%) started on SOLI. 74.5% were women. The mean age was 61,29 years. Out of the 566 patients who started on FESO, 194 (34.3%) escalated dose, 48 (8.5%) reduced dose, 156 (27.6%) HDM and 168 (29.7%) LDM. Out of the 262 patients on SOLI; 134 (51.1%) escalated dose, 12 (4.6%) reduced initial dose, 48 (18.3%) HDM, 68 (26.0%) LDM. The patients which dose was maintained, whether started at high or low dose, presented the lowest OAB evolution time in both FESO and SOLI groups, compared to those which dose was increased, who experienced significantly longer OAB evolution periods. LDM patients presented a significantly lower number of incontinence episodes vs other groups in both FESO and SOLI arms (20.8% and 38.2% respectively). According to the PPUS scale (Patient Perception Urgency Scale) the group of SOLI showed a higher percentage of patients who were not able to hold urine in all doses groups vs FESO group, especially in the LDM group (FESO 6.5% vs SOLI 14.7% p=0,001). Likewise 43.5% of patients using FESO were able to finish their tasks before going to the bathroom (without urine losses) vs 19.1% in the SOLI group, p=0,002. The percentage of patients who experienced "great improvement" on TBS scale (Treatment Benefit Scale) was almost double in all dose groups with FESO compared with SOLI. (37.6% vs 20.1% in the increase dose group, 42.9% vs 22.9% in HDM and 47% vs 11.8% for LDM). Except the decreased group, which was the same in both treatment arms. Patients treated with FESO had significant differences between the 4 dose groups in the Morisky-Green scale, the HDM group showed the greatest treatment compliance (62.2% p=0.000). Patients treated with SOLI had similar treatment adherence in the 4 groups (p=0.430)

Interpretation of results

FESO, in all dose groups, showed a lower percentage of patients unable to hold urine and the highest percentage of patients able of finishing their tasks, without incontinence episodes. Patients reported a higher percentage of "great improvement" referred to treatment benefit in the FESO groups compared to SOLI.

Concluding message

Patients which dose was maintained presented the lowest OAB evolution time in both FESO and SOLI groups, compared to those which dose was increased, who experienced significantly longer OAB evolution periods. FESO showed greater improvement than SOLI according to TBS, PPUS scale and better treatment adherence than SOLI according to Morisky-Green.

Table 1. TBS Scale (Treatment Benefit Scale)

		Increase dose		Decrease dose		High dose and maintained		Low dose and maintained	
		N	%	N	%	N	%	N	%
Fesoterodine	Greatly improved	73	37.6	16	33.3	67	42.9	79	47.0
	Improved	104	53.6	23	47.9	76	48.7	80	47.6
	No change	17	8.8	9	18.8	11	7.1	8	4.8
	Worsened	0	.0	0	.0	2	1.3	1	.6
	Total	194		48		156		168	
	P_value	0.084							
Solifenacin	Greatly improved	27	20.1	4	33.3	11	22.9	8	11.8
	Improved	85	63.4	5	41.7	26	54.2	46	67.6
	No change	21	15.7	3	25.0	10	20.8	14	20.6
	Worsened	1	.7	0	.0	1	2.1	0	.0
	Total	134		12		48		68	
	P_value	0.478							

Disclosures

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