THE PREVALENCE OF POST-MICTURITION DRIBBLING (PMD) IN YOUNG MEN. A STUDY FROM A TERTIARY CARE CENTRE

Hypothesis / aims of study
Some reported PMD as “incomplete emptying” with prevalence of 11.8% in men and 8.5% in women (1). Another study using mailed questionnaires, involved 2217 men in a rural community found the prevalence of PMD was 21% overall, 20% among men of the age 40-49 years (2). PMD is thought to result from failure of Bulbospongiosus muscles to evacuate the bulbar urethra, causing pooling of urine in the bulbar portion, which later dribbles. We studied the prevalence of PMD, using standard definition and standard procedure, in a tertiary care center.

Study design, materials and methods
A literature review was carried out to explore the magnitude of the condition, the possibly pathophysiological background and possible treatment. Then, during the period of November and December 2013, males attending OPD were screened for PMD. All men above 18 and below 45 years were examined. Patients underwent urinalysis, US estimation of PVR, uroflow. They were asked to answer an Arabic version of I-PSS. An additional question on PMD was added. PMD was defined as “dribbling of urine after complete cessation of voiding, continuing long enough to bother the patient”.

Those with PMD as major complaint were included if the following applied: Age : 18-45 years, willing to answer modified I-PSS, unremarkable clinical examination, Q max in free flow is > 15 ml/s (in 2 measurement at least), PVR: < 50 ml, urinalysis is free on microscopic examination(WBCs< 5/ HPF)

6- week training in Crook lying position with instructions to contract the anal sphincter muscle while looking for “penile dip” were given to those patients.

Results
Thirteen men out of 383 screened attending OPD were diagnosed to have PMD as their primary urological complaint.

Interpretation of results
This is a prevalence of 3.4% in men attending OPD in a tertiary care center. Those men with PMD were given a program of 6 week muscle training of the bulbospongiosus muscles. Final evaluation reveals an improvement of their symptom score of 60% after 6- week muscle training.

Concluding message
PMD is probably overestimated/misdiagnosed in the literature. Although the incidence in our population is low, the treatment strategy was non-standardized and the follow up was negligible. An ongoing study on the effect of muscle training is underway.

References

Disclosures