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A COMPARATIVE STUDY ON THE QUALITY OF LIFE BASED ON EQ-5D AS AFFECTED BY SIDE EFFECTS AFTER ANTIMUSCARINIC TREATMENT FOR OAB

Hypothesis / aims of study
Overactive bladder (OAB) degrades the quality of life and particularly so when associated with other diseases. Although OAB is not a life-threatening disease, it significantly constrains the life of the patient and thereby decreases the quality of life and may incur significant social costs if the diagnosis or the treatment is inappropriate. A combination of behavioural and drug therapy is the mainstay of treatment, but antimuscarinic agents have side effects such as dry mouth, constipation, blurred vision, and impaired cognitive function. These effects decrease the patients’ compliance, resulting in cessation of medication in many cases. A need is thus perceived for OAB medications with fewer side effects. The authors therefore assessed the impact of side effects on health-related quality of life (HR-QoL) through an analysis of questionnaires filled in by enrolled OAB patients.

Study design, materials and methods
This study was designed to investigate the patients’ satisfaction by quality weight or utility weight of health status as affected by the side effects of OAB medications in 4 tertiary hospitals in Korea. The study was approved by the IRBs of all hospitals. Patients who had OAB symptoms lasting longer than 3 months and side effects after any antimuscarinic treatment filled in the EQ-5D questionnaire by themselves. Patients who had stress urinary incontinence or mixed urinary incontinence, urine output greater than 3,000 ml per day on the voiding diary, residual urine >100ml, urinary tract infection, urinary stone, interstitial cystitis, or bladder outlet obstruction including benign prostate hyperplasia were excluded. EQ-5D questionnaire and VAS score for two different health statuses, presence or absence of side effects, were analyzed by the enrolled 100 patients. Quality weight was calculated using the score of EQ-5D health status.

Results
One hundred patients were enrolled and completed the HR-QoL questionnaire. Most of the patients were over 60 years old (70%), and 72% of the patients were female. The most prevalent side effect was dry mouth (61%), followed by constipation (4%), blurred vision 2%, voiding difficulty (2%), and fatigue (2%). 28% of the patients had dry mouth and constipation concurrently. Most of the patients with side effects tried to endure and overcome these side effects (79%), but 10% desired a change in medication, and 6% stopped medication altogether. Fifty five patients replied that they consider side effects to be an important factor in deciding on the continuation of medication. The quality weight of EQ-5D without side effects was 0.863, while the weight with side effects was 0.666 (p=0.00000014). The VAS score was 79 in patient without side effects and 57 in those with side effects, supporting the results of quality weight assessment. The same trend was observed when stratified according to age and sex. As for the overall distribution of ED-5D, the patients with side effects were less healthy in terms of daily life, pain/discomfort, and anxiety/depression.

Interpretation of results
OAB patients may enjoy a better quality of life if side effects associated with antimuscarinic therapy are fewer.

Concluding message
Physicians should be wary of the side effects of antimuscarinic agents when treating OAB patients, as the side effects could adversely affect the quality of life in these patients.

Disclosures