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EFFECTS OF ALTERING FLUID INTAKE TIME ON NOCTURIA

Hypothesis / aims of study

Nocturia is a prevalent disease of aging, regardless of gender. Despite the severe bother with nocturia, patients generally do not seek treatment, and even if they do they rarely try to alter lifestyles. A prevalent problem with nocturia patients is, ironically, copious fluid intake. Altering life styles to try and imbibe fluid to morning may decrease urine output by night, hence decreasing nocturia. The present study was aimed to decrease nocturia without pharmacologic means, purely by increasing fluid intake in the morning and decreasing fluid intake in the afternoon.

Study design, materials and methods

Patients were recruited from 2014 March through 2015 July. Before any pharmacologic treatments were initiated, patients were recommended to increase morning fluid intake and decrease afternoon fluid intake. Patient voiding diaries were collected, demarcated with before and after following instructions. Nocturnal voiding frequencies, along with NPI, NBCI, and volume and frequency indices pertaining to morning (waking time to 2 pm) and afternoon (2 pm to sleep) were noted.

Results

Overall 209 patients submitted 630 complete days of voiding diaries. Age was 59.76 \bar{i} , \pm 12.75 years, with 94 men and 115 women. Total nocturia counts decreased from 2.63 \bar{i} , \pm 1.43 to 2.00 \bar{i} , \pm 1.16 (p <0.001) and nocturnal voided volumes decreased from 421.49 \bar{i} , \pm 305.10ml to 326.76 \bar{i} , \pm 277.29 (p =0.001). NPI decreased from 0.35 \bar{i} , \pm 0.15 to 0.29 \bar{i} , \pm 0.13, while nocturia index decreased from 1.87 \bar{i} , \pm 0.97 to 1.40 \bar{i} , \pm 0.77 (p =0.02). However, total voided volumes only decreased from 1677.04 \bar{i} , \pm 603.78ml to 1595.17 \bar{i} , \pm 604.72ml.

Concluding message

While education and instructions alone significantly decreased nocturia to a certain extent, the small decrease in nocturia may have been hampered by poor compliance. More stringent measures to monitor fluid intake could be beneficial, perhaps comparably to pharmacologic measures.

Disclosures

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