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Morán Pascual E[1], Villarroya S[1], Romeu G[1], Arlandis-Guzman S[1], Bonillo M A[1], Martinez-Cuenca E[1], Broseta Rico E[1], Boronat Tormo F[1]
1. Hospital Universitario y Politécnico La Fe

MULTIPLE SCLEROSIS: THE GREAT MASQUERADER? TYPICAL URODYNAMIC FINDINGS BUT NOT PREDICTIVE FACTORS OF RESPONSE TO TREATMENT.

Hypothesis / aims of study
This is the first time that predictive factors of good response to treatment are sought. Also we tried to describe urodynamic findings in patients with multiple sclerosis (MS), treatments applied and response rates .

Study design, materials and methods
Descriptive retrospective on a cohort of patients referred to the Urodynamics Unit with MS. The demographic variables collected were: age, sex, type of MS, expanded disability status scale of Kurtzke (EDSS) and the type of urinary tract symptoms (filling, voiding, postmictional or mixed). All patients underwent a urodynamic study recommending treatment based on the results. The response was assessed using the validated questionnaire treatment benefit scale (TBS). We performed a multivariate analysis to describe predictive factors of good response to the treatment.

Results
We analyze 132 patients, of which 93 were women(70,2%). Mean age was 51,67 years(S.D.:12,83) with mean EDSS value of 4,61(S.D.:1,9). The most common type was the relapsing-remitting(40,2%) followed by the secondary-progressive(37,9%). The majority of patients (78%) have more than 10-year of evolution. The most common symptoms were mixed (41.7%) followed by filling(38,6%), being urgency incontinence present in the majority of patients (44.7%). The most frequent urodynamic finding was detrusor overactivity (49.2%). Hypocontractility/acontractility was found in (19.7%). The most common treatments were: anticholinergics (26.5%) and beta-3 agonists(11,4%). 3% required SIC and 3.8% needed detrusor injection of botulinum toxin. General response rates were 50%. The multivariate analysis included: age, sex, type of MS, time of evolution, types of symptoms, or urodynamic findings as predictive factors of good response findings. None was as a predictor of good response processing.

Interpretation of results
MS has been known as the great masquerader. Experience showed us that when treating a lot of this patients, once diagnosed, the majority of them follow the same urodynamic patterns (1). Anticholinergics are still the preffered treatment(2). No studies were found about predictive factors of good response to treatment.

Concluding message
MS can present multitude of symptoms urinary being the more frequent the mixed and urge urinary incontinence. Urodynamics showed that detrusor hyperactivity is the most frequent finding. Medical treatment is preferred presenting rates of response near 50%. Any factor that can predict the good response to the treatment.

References
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