

INTRAVESICAL INSTILLATION OF BAOBAB OIL IN THE TREATMENT OF RECURRENT BACTERIAL CYSTITIS. PRELIMINARY DATA.

Hypothesis / aims of study

Urinary tract infections are common in the female population and, over a lifetime, about half of women have at least one episode of UTI requiring antibiotic therapy. The aim of the current study was to evaluate the role of instillation of Baobab oil in preventing recurrent bacterial cystitis

Study design, materials and methods

From January 2014 to June 2015, thirty female patients with documented history of recurrent bacterial cystitis (defined according to the European Association of Urology (EAU) criteria), lower urinary tract symptoms and unresponsive to standard therapies, were enrolled in this observational study. All patients signed an informed consent.

Patients were treated with an intravesical instillation of 50 ml sterile Baobab natural oil (Baotrophic, Physion, Italy); the instillation was administered slowly using an 8/10 F Nelaton silicon catheter under sterile conditions (after removal of any residual urine). The solution was retained in the bladder for 60 minutes. The patients received treatment every week during the 1st month and then once monthly for 4 months. Treatment satisfaction was evaluated using a 5-point Likert scale (very satisfied - 5, satisfied - 4, uncertain - 3, dissatisfied - 2 and very dissatisfied -1). Treatment was considered satisfactory when patient answers were "very satisfied" or "satisfied". Outcome measures were: number of cystitis/year, eventual adverse events, patientsatisfaction.

Results

The cystitis episodes decreased after the procedure (cystitis episodes in the year before treatment: 6 ± 0.91 vs. cystitis episodes in the year after treatment: 3.3 ± 1.5 ; $P < 0.0001$) (Figure 1). In the year after treatment we showed a cystitis episodes decrease ($T_{0-3\text{ month}}$: 2.07 ± 0.98 ; $T_{3-6\text{ month}}$: 0.73 ± 0.69 ; $T_{6-12\text{ month}}$: 0.5 ± 0.51 ; $P < 0.0001$) (Figure 2), in particular the decrease was statistically significant between $T_{0-3\text{ month}}$ vs. $T_{3-6\text{ month}}$; $P < 0.0001$ but not between $T_{3-6\text{ month}}$ vs. $T_{6-12\text{ month}}$; $P > 0.05$ (Figure 2). There were no adverse events with the treatment. Patient satisfaction with the treatment was 3.6 as mean (DS ± 0.66)

Interpretation of results

Our data analysis demonstrated that instillation of Baobab oil is effective in terms of prevention of recurrent bacterial cystitis. In addition, it is a feasible and well-accepted treatment.

Concluding message

In conclusion, our preliminary data, showed that intravesical Biobab oil was a possible therapeutic option for the patients with recurrent bacterial cystitis resistant to traditional therapy, which could permit us to avoid repeated and harmful use of antibiotic therapy. Large randomized studies are needed.

Figures

Figure 1

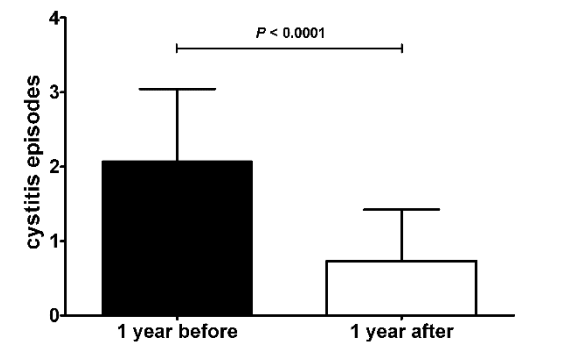
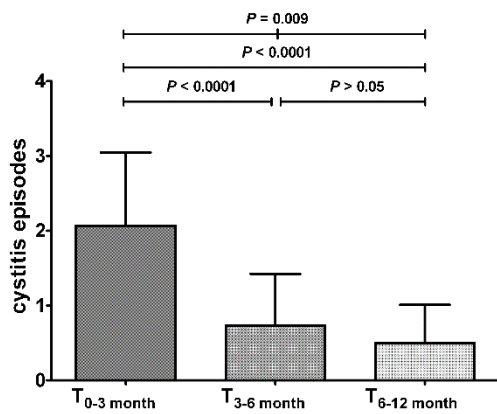


Figure 2



References

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Disclosures

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