

## DOES PRESENCE OF SPINA BIFIDA AFFECT PROGNOSIS AMONG ENURESIS NOCTURNA PATIENTS?

### Hypothesis / aims of study

Enuresis is synonymous to intermittent nocturnal incontinence. With a prevalence of 5-10% at seven years of age, it has a spontaneous yearly resolution rate of 15% (1). In some children it may continue until adulthood. The child's mental status, family expectations, social issues and cultural background are known to affect this disorder. In our study we aimed to assess the incidence of spina bifida in patients applying to our clinic with complaint of enuresis.

### Study design, materials and methods

The results of 71 patients applying to our clinic from July 2014-March 2017 with complaint of enuresis nocturna were retrospectively assessed. As the age of onset for puberty is around 11 years in our country (2), patients were divided into two groups as below and above the age of 11. Group 1 included 51 patients while Group 2 included 20. All patients had direct urinary system x-ray (DUSI) taken during first examination. Those with posterior fusion defect at L5 and S1 on DUSI were assessed as spina bifida. The incidence of spina bifida in both groups was compared. Statistical assessment used the chi square test. As groups did not abide by normal distribution, the results are given as median±IQR (min-max) (IQR: Interquartile Range).

### Results

The age of patients in Group 1 was median 8 ± 3 (5-11) years, and in Group 2 was median 15 ± 5 (12-28) years. The number of nights with enuresis experienced within a month was median 30 ± 19 (4-30) in Group 1 and 15 ± 18 (6-30) in Group 2. Of patients in Group 1, 60.8% (31) were male and 39.2% (20) were female; while in Group 2 45% (9) were male and 55% (11) were female. Of the 51 patients in Group 1, 9 (17.6%) had spina bifida, while of the 20 patients in Group 2 9 (45%) had spina bifida. The difference between the two groups was found to be statistically significant (p<0.001).

### Interpretation of results

In studies by Cakiroglu et al. (3) they stated the presence of spina bifida negatively affected treatment success. In our study, in cases with enuresis continuing in spite of age advancing, the incidence of spina bifida was observed to be higher compared to younger ages.

### Concluding message

The identification of spina bifida in children applying with the complaint of enuresis nocturna may be an indicator that the complaint will continue for longer.

### References

1. EAU Guidelines 2016, Pediatric urology, 3.10. Monosymptomatic enuresis, page 39
2. Saka H N, Neyzi O, Puberte baslangic yasi degisiyor mu ? Türk Pediatri Arsivi 2005; 40: 7- 14
3. Cakiroglu B, Tas T, Eyyupoglu S.E, The adverse influence of spina bifida occulta on the medical treatment outcome of primary monosymptomatic nocturnal enuresis, Archivio Italiano di Urologia e Andrologia 2014; 86, 4

### Disclosures

**Funding:** NONE **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics not Req'd:** This is a retrospective study. The data in the study was obtained by screening patient files **Helsinki:** Yes **Informed Consent:** Yes