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URGENCY IS A CRUCIAL TARGET FOR NOCTURIA IN MALE PATIENTS WITH LOWER URINARY TRACT SYMPTOMS: RESULTS FROM A MULTICENTER PROSPECTIVE STUDY.

Hypothesis / aims of study

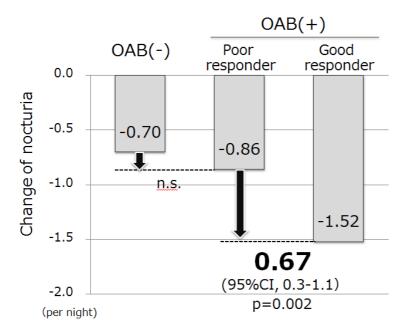
Nocturia is a common and bothersome symptom that impacts on quality of life. Numerous treatment options for nocturia exist, but most are associated with minor benefit or lack sufficient evidence supporting their use. There is limited evidence on who benefit from treatment for nocturia. Urgency, a chief complaint of overactive bladder (OAB), is often associated with nocturia. However, impact of improvement of urgency on nocturia is not fully elucidated. Here, we evaluated the association between improvement of urgency and the decrease in nocturia and assessed to what extent improvement of urgency affect nocturnal frequency in male patients with lower urinary tract symptoms (LUTS).

Study design, materials and methods

This prospective study included 80 male LUTS patients; 62 patients have urgency (OAB patients) and 18 were not (non-OAB patients). These patients were prescribed 50 mg of Naftopidil, α1 blocker for 4 weeks followed by 75 mg of Naftopidil for another 4 weeks. I-PSS and OABSS questionnaire (higher scores indicate worse symptoms) were collected at baseline, 4 weeks and 8 weeks after Naftopidil. For OAB patients, good responders were defined as at least one-point decrease in OABSS questionnaire score 8 weeks after Naftopidil.

Results

Nocturia was significantly decreased by 0.8 and 1.1 per night 4 and 8weeks after naftopidil, respectively (p<0.01). Of 62 OAB patients, 35 (56%) was good responders, and the other 27 (44%) was poor responders. No difference was found in age and OABSS, nocturia at baseline. For good responder, nocturia was decreased by 1.52, and for poor responder, nocturia was decreased by 0.86. Difference in change of nocturia between these groups was statistically significant (0.67, 95% CI 0.3-1.1, p=0.002). Decrease of nocturia in patients without OAB and that of poor responders with OAB was almost equivalent (0.70 vs 0.86, n.s.)



Interpretation of results

We confirmed the association between improvement of urgency with Naftopidil and the decrease in nocturia. Urgency We also found that almost 50% of nocturia could be attributed to urgency in male OAB patients.

Concluding message

Our results indicate that urgency is a crucial therapeutic target for nocturia in these patients.

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