

1049

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## COMPARISON OF THE EFFECTS OF NAFTOPIDIL AND TAMSULOSIN ON BLADDER STORAGE SYMPTOMS IN PATIENTS WITH BENIGN PROSTATIC HYPERPLASIA : A PROSPECTIVE, MULTI-INSTITUTIONAL STUDY

### Hypothesis / aims of study

Naftopidil is a selective  $\alpha$ -1D blocking agent that reduces storage symptoms in lower urinary tract symptoms (LUTS) secondary to benign prostatic hyperplasia (BPH). This study was undertaken to compare the efficacies of naftopidil and tamsulosin in terms of reducing storage symptoms in patients with BPH.

### Study design, materials and methods

This prospective randomized study was performed at 10 centers. Ninety-four patients that had been taking tamsulosin for more than 8 weeks, but had an OABSS (Overactive Bladder Symptom Score) of greater than 3 points were initially enrolled. After a 1 week washout period, patients were divided into two groups. Forty-five patients were treated with tamsulosin 0.2 mg daily for 8 weeks, and 49 patients were treated with naftopidil 75 mg daily for 8 weeks. Total International Prostate Symptom Scores (IPSSs), IPSS storage symptom scores, nocturia times, OABSS scores, maximal flow rates (Q<sub>max</sub>; as determined by uroflowmetry), and post-void residual volumes (PVR) were checked before and after the 8-week treatment period.

### Results

Mean patient ages in the tamsulosin and naftopidil groups were 64.8 and 66.0 years, respectively. Group baseline characteristics were not significantly different. In the tamsulosin group, mean total IPSS fell from 17.3 to 15.1 after the 8-week treated period ( $p < 0.05$ ), and in the naftopidil group, mean total IPSS fell from 16.5 to 13.1 ( $p < 0.001$ ). Mean IPSS storage symptom scores reduced significantly in the tamsulosin and naftopidil groups from 7.8 to 6.6 ( $p < 0.05$ ) and from 7.4 to 6.1 ( $p < 0.001$ ), respectively. Mean nocturia times in the tamsulosin and naftopidil groups decreased from 2.2 to 2.0 ( $p < 0.05$ ) and from 2.4 to 1.9 ( $p < 0.001$ ) ( $p < 0.05$ ), respectively, and mean OABSS scores reduced from 7.7 to 6.0 ( $p < 0.001$ ) and from 7.7 to 6.0, respectively ( $p < 0.05$ ). However, Q<sub>max</sub> and PVR were not significantly altered by treatment.

### Concluding message

Total IPSS, storage symptom scores, nocturia times and OABSS were significantly more reduced by naftopidil and tamsulosin. Moreover, the naftopidil group showed better improvements in nocturia than the tamsulosin group.

### Disclosures

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