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| Video Demonstration |
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Abstract Reproduction Form B-1

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| City | *Dept.Obstet.Gynecol.,Charles Univ. Praha; #Apogepha Arzneimittel GmbH |
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| Title (type in CAPITAL LETTERS) | TREATMENT OF FEMALE URGENCY BY THE ANTICHOLINERGIC DRUG PROPIVERINE |

Aims of Study: The efficiency and the dosage of propiverine were stated in patients suffering from urgency, urge incontinence, and mixed incontinence. The manner and frequency of side effects of propiverine hydrochlorid are detected and documented.

Methods: Under practice conditions of a whole of 3473 pts. 604 women suffered from urgency, 1125 women complained of urge incontinence, while 1323 pts suffered from mixed incontinence. The patients of the 3 populations are divided in two age groups (16-65 vs. over 65 years). The clinical efficiency of 12 weeks of propiverine application was documented by micturition protocol, Gaudenz urge and stress score, usage of pads, uroflowmetry and residual volume as well as compatibility. Furthermore we asked for dysuria and usage of pads in the groups.

Results: The frequency of imperative micturition daily as well as by night diminish in both whole collectives as well as in the age populations of all collectives. Dysuria was found only in 7,7% (T12) compared with 37,7% (To). The micturition frequency diminishes daily and at night as well. Also the usage of pads and the urge score are lower after ending the therapy. The tendency of diminishing of the values in the younger group is more significantly. The residual urine in all groups was nearly unchanged. All results are determined by application of 2 to 3 dragees of propiverine daily. Nearly 90% of the pts will have a win with this anticholinergic therapy. Only 4,6% felt unaffected while 5,5% of the pts suffered from side effects.

Conclusion: Propiverine as anticholinergic drug seems to be very effective and useful for treating disturbances of the vesical function. This could be shown by the results of a representative patients population and in 2 age groups as well as in 3 groups of indications.

Abstract Reproduction Form B-2

Author(s):

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| Parameter | all females | | | | urgency | | | |
|---|-------------|----------|--------|----------|---------|----------|--------|----------|
| | 16<x<64 | | > 65 | | 16<x<64 | | > 65 | |
| | before | 12 weeks | before | 12 weeks | before | 12 weeks | before | 12 weeks |
| n | 2035 | | 1017 | | 462 | | 142 | |
| age | 49,6 | | 73,2 | | 47,4 | | 72,9 | |
| weight | 70,7 | | 71,1 | | 68,1 | | 70,3 | |
| frequency | 9,7 | 4,8 | 9,2 | 5,9 | 10,1 | 5,8 | 9,8 | 6,2 |
| nocturia | 2,6 | 0,8 | 3 | 1,3 | 2,7 | 0,8 | 3,7 | 1,7 |
| Gaudenz-MR | 14,4 | 8,2 | 16,1 | 9,3 | 13,1 | 7,2 | 14,1 | 9,1 |
| Gaudenz-UI | 9 | 9,4 | 7,7 | 9,4 | 7,2 | 8,2 | 7,3 | 7,8 |
| Uroflow | 22,8 | 23 | 20,2 | 22,1 | 20,9 | 23,8 | 19,1 | 21,8 |
| Residuum | 20,1 | 11 | 21,5 | 15,1 | 13 | 8,3 | 19,6 | 13,5 |
| Adverse ev. | | | | | | | | |
| dryness (%) | | | | | | | | |
| none | 81,4 | 58,4 | 74,8 | 55 | 86,1 | 65,6 | 81 | 62,7 |
| light | 14,1 | 35,5 | 20,5 | 37,8 | 10,8 | 31 | 15,5 | 31,7 |
| medium | 3,2 | 5 | 2 | 5,5 | 1,7 | 2,8 | 2,8 | 10,6 |
| hard | 1 | 1,2 | 1,7 | 1,7 | 1,3 | 0,6 | 0,6 | 6,3 |
| accom.dist.% | | | | | | | | |
| none | 93,4 | 88,8 | 91 | 88,1 | 97,6 | 94,6 | 94,6 | 87,3 |
| light | 5,3 | 9,2 | 7,3 | 10,5 | 2,2 | 5 | 5 | 7 |
| medium | 1 | 1,5 | 1,2 | 1,1 | | 0,2 | 0,2 | 4,2 |
| hard | 0,3 | 0,5 | 0,5 | 0,3 | 0,2 | 0,2 | | |
| effectivity reported by patient | | | | | | | | |
| excellent | 49,5 | | 39,1 | | 53,9 | | 36 | |
| good | 35,1 | | 41,4 | | 33,7 | | 41,2 | |
| improved | 9,8 | | 12,1 | | 7,1 | | 11,8 | |
| unchanged | 5,5 | | 7,4 | | 5,3 | | 11 | |
| effectivity reported by physician. | | | | | | | | |
| excellent | 50,4 | | 37 | | 56,4 | | 36 | |
| good | 35 | | 42,6 | | 30,9 | | 41,9 | |
| improved | 9,8 | | 13,7 | | 8,4 | | 11,8 | |
| unchanged | 4,8 | | 6,7 | | 4,3 | | 10,3 | |
| tolerability reported by patient | | | | | | | | |
| excellent | 38,7 | | 36,7 | | 43,2 | | 35,3 | |
| good | 45,9 | | 47,9 | | 41,4 | | 44,1 | |
| improved | 10,6 | | 11,7 | | 10 | | 13,2 | |
| unchanged | 4,8 | | 3,7 | | 5,4 | | 7,4 | |
| tolerability reported by physician | | | | | | | | |
| excellent | 43,8 | | 38,7 | | 46,6 | | 34,6 | |
| good | 45,3 | | 51,2 | | 41 | | 49,3 | |
| improved | 7,8 | | 7,8 | | 7,8 | | 10,3 | |
| unchanged | 3,1 | | 2,3 | | 4,5 | | 5,9 | |
| dysuria | | | | | | | | |
| no | 66,3 | 93,7 | 59 | 89,3 | 63,8 | 94 | 57,5 | 88,5 |
| yes | 33,7 | 6,3 | 41 | 10,7 | 36,2 | 6 | 42,5 | 11,5 |
| usage of pads (%) | | | | | | | | |
| no | 25,6 | 50,1 | 18,7 | 37 | 68,1 | 77,4 | 66,3 | 71,9 |
| yes,dry | 6,6 | 26,9 | 4,3 | 27,6 | 20,5 | 20,5 | 20,2 | 20,2 |
| yes,damp | 48,7 | 21,1 | 47,9 | 31,1 | 10,8 | 1,7 | 12,4 | 7,9 |
| yes,wet | 19,1 | 1,9 | 29,2 | 4,3 | 0,7 | 0,3 | 1,1 | |