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**HEALTH-RELATED QUALITY-OF-LIFE IN CONTINENT OVERACTIVE BLADDER SUBJECTS:
EARLY RESULTS FROM THE NOBLE PROGRAM**Aims of study

The National Overactive BLadder Evaluation (NOBLE) Program comprises studies designed to provide specific information on the prevalence and impact of overactive bladder (OAB) symptoms in the USA. OAB is a symptomatic diagnosis used to describe the symptoms of urgency, frequency, with or without urge incontinence. Previous studies on OAB patients have focused primarily on those with incontinence. As part of NOBLE, this qualitative study examined the effect of symptoms of a small group of predominantly continent OAB patients on health-related quality-of-life (HRQoL) and coping behaviours.

Methods

Two focus groups (men=7; women=9; mixed/urge incontinence=3) were conducted to address the symptoms (frequency, urgency, leakage/incontinence), coping behaviours and life impact of symptoms of OAB. Participants were recruited via newspaper advertisement and screened to ensure they met the study criteria. Participants were asked open ended questions on symptoms, coping behaviours and life impact. Data were analyzed using content analysis. Participants were also asked to complete a generic HRQoL questionnaire (SF-36). No statistical analyses were performed in this qualitative study due to the small sample size.

Results

The mean age for men was 54 and 48 for women; 9% of all participants had previously sought medical attention for 'bladder symptoms'. Both groups demonstrated lower scores, and therefore a lower HRQoL, on the SF-36 than normative populations [1]. In many cases, these differences were greater than the 5 points required for a clinically meaningful difference on the 8 subscales [2].

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Summary scores	Mean (SD)			
	Men	Norms ¹	Women	Norms ¹
Physical function	72.9 (27.1)	86.5 (20.4)	80.6 (23.2)	82.9 (21.7)
Social function	67.9 (31.2)	85.5 (22.9)	79.2 (24.2)	82.7 (20.8)
Vitality	57.1 (19.8)	63.1 (20.4)	56.7 (18.7)	60.6 (21.3)

¹Norms based on ages 45–54

Participants reported significant impact on their HRQoL due to symptoms of OAB in a variety of domains. The symptoms of frequency, urgency, and nocturia caused significant alterations in productivity, travel/commuting, sleep, physical activities, social functioning, relationships, and psychological well-being, as well as the development of a number of coping strategies. Most issues were similar between men and women, although men reported that lost sleep due to nocturia was the most significant impact of OAB on their lives. In contrast, women were unable to identify a single prominent issue or domain, although a wide range of behaviours was reported as important.

Conclusions

Studies of incontinent patients in general have shown that there is a reduced HRQoL and an increased use of coping behaviours [3]. Our study, the first to examine the HRQoL and coping behaviour in predominantly continent overactive bladder patients, suggests that the OAB symptoms of frequency and/or urgency without incontinence do cause an impact on lifestyle that is similar to that reported in patients with incontinence. This hypothesis will be tested in a large number of individuals using a new questionnaire derived from this pilot study.

References

1. SF-36 Physical and mental health summary scales. A User Manual. Boston: The Health Institute. New England Medical Center, 1994.
2. SF-36 Health Survey: Manual and interpretation guide. Boston: The Health Institute, New England Medical Center, 1993.
3. Economic considerations and outcome measurement in urge incontinence. *Urology* 1997; 50 (Suppl): 100-110.

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