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**Title:** ACUPUNCTURE FOR FEMALE STRESS URINARY INCONTINENCE: SEAPI, AUAQOL AND VIDEO-URODYNAMIC ASSESSMENT

### **Aims of Study:**

Using validated SEAPI and AUAQOL questionnaires, plus video-urodynamic findings, the response to acupuncture for female stress urinary incontinence was evaluated.

### **Methods:**

Seventeen women, with a mean age of 58.7 years (range 36-72) participated in a prospective study of acupuncture treatment for female stress urinary incontinence from August 1998 to June 2000. Other than Kegel exercises, acupuncture was primary therapy for all patients. Patients with a history of pelvic surgery (including hysterectomy), and concomitant therapy were excluded. The workup included clinical exam, cystoscopy, SEAPI and AUAQOL questionnaires, and video-urodynamics (UDS). Acupuncture was performed by a single qualified medical practitioner using a standardized technique according to the Acupuncture Foundation of Canada. Post treatment evaluation consisted of repeat SEAPI and AUAQOL questionnaires and video-urodynamics at set intervals.

### **Results:**

No treatment complications were encountered. Fifteen patients had video-urodynamic evaluation at 8 weeks post treatment and 12 of the 17 patients were available for 6-month follow-up. Mean bladder capacity was 377.9 cc pre-treatment (range 208.5 to 795cc), and 416.0 cc post-treatment (range 262.5 to 651.5cc) ( $p>0.05$ ). Instability was demonstrated in 5 patients pre-treatment, and 2 patients post-treatment ( $p>0.05$ ). There was no de-novo instability. Eleven patients had demonstrable leakage on pre-treatment UDS, and 7 patients leaked on post video-urodynamics ( $p>0.05$ ). In those who leaked the post LPP (126 cm H<sub>2</sub>O) was significantly higher than pretreatment (97 cm H<sub>2</sub>O) ( $p<0.05$ ). Mean subjective pre-treatment SEAPI score was 8.0 (range 6-10). At 2 weeks post-treatment the score fell to 3.2 ( $p<0.0001$ ). Of the 12 patients who were available at 6 months the mean subjective SEAPI score was significantly lower than the pretreatment value ( $p<0.0001$ ). At 2 weeks there was significant improvement in AUA QOL question (p<0.0001) that persisted at 6 months (p<0.0001).

### **Conclusions:**

In this cohort of patients with female stress urinary incontinence treated with acupuncture, a significant improvement in SEAPI and AUAQOL scores was demonstrated. Changes in video-urodynamic findings may also suggest improvement, however, further evaluation with a randomized is required to test efficacy.

This study was funded internally.