TOLTERODINE: AS EFFECTIVE BUT BETTER TOLERATED THAN OXYBUTININ IN ASIAN PATIENTS WITH SYMPTOMS OF OVERACTIVE BLADDER

Aims of study:
This double-blind, multicentre study compared the efficacy and tolerability of tolterodine, with that of oxybutynin, in Asian patients with overactive bladder.

Methods:
228 adults with overactive bladder symptoms, were randomized to receive tolterodine 2 mg twice daily (bd) (n=112) or oxybutynin 5 mg bd (n=116). After 8 weeks of treatment, changes in micturition diary variables, patients’ perception of treatment benefit and tolerability endpoints were determined.

Results:
After 8 weeks’ treatment, the mean (± SD) number of micturitions/24 hours decreased by 2.6 ± 2.9 (20%) with tolterodine and 1.8 ± 4.2 (15%) with oxybutynin (both p=0.0001 vs baseline). The mean number of incontinence episodes/24 hours decreased by 2.2 ± 2.3 (76%) in the tolterodine group and by 1.4 ± 1.8 (67%) in the oxybutynin group (both p=0.0001 vs baseline). Patient perception of treatment benefit was over 70% in each treatment group. Adverse events was significantly lower in the tolterodine group compared with oxybutynin-treated patients (55% vs 82%; p=0.001). Dry mouth was reported by significantly fewer patients on tolterodine compared with oxybutynin (35% vs 63%; p=0.001), with a trend towards a higher frequency of moderate-to-severe dry mouth among oxybutynin recipients. Withdrawals due to adverse events were lower in the tolterodine group compared with those treated with oxybutynin (10% vs 16%). There were no safety concerns.

Conclusions:
Tolterodine 2 mg bd is equally or more effective than oxybutynin 5 mg bd in the treatment of Asian patients with overactive bladder and shows better tolerability, that may enhance compliance during long-term treatment.

Key words: Tolterodine, Overactive bladder, Oxybutinin, Asian