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# FEMALE PATIENTS PRESENTING WITH LUTS IN UROLOGY CENTRES IN ITALY: FIRST EVALUATION FROM THE FLOW STUDY

# Aims of Study

The FLOW study (Female LUTS: Observational study in Women) is a 2-year non-interventional investigation - currently ongoing - aimed at evaluating the clinical profile and the diagnostic and therapeutic management of Italian women presenting with LUTS in Urology Outpatients Clinics. The present work reports on patients characteristics and their management on the basis of freely chosen procedures in each centre. The relative frequency of LUTS, the related bothersomeness and their impact on the quality of life were evaluated by means of two questionnaires: the W-IPSS and the ICIQ-LF. Their validation process is matter of another work which is presented separately.

## **Methods**

Patients (age = 18 years, negative dipstick) suffering from LUTS from at least 3 months, and regarded to be compliant with questionnaire compilation, were consecutively enrolled in 36 Italian Centres of Urology. They underwent a urological visit according to the routine procedures used at each centre. The only procedure prescribed by the protocol was the self-administration of two questionnaires: the ICIQ-LF (ICI Questionnaire – Long Form) and the W-IPSS (International Prostate Symptom Score, adapted for women: the QoL single question refers to urinary symptoms generically, in spite of the specific reference to prostatic disease of the original IPSS). The present paper reports on data related to 750 patients.

#### Results

The mean (SD) age of the enrolled women was 54 (14) year and the large majority of patients (86%) was new to the Centers. Patients were self-referred in a significant percentage of cases (30%). The presence of LUTS (with or without a definite diagnosis) had been previously recognised in 38% of patients.

Of the laboratory assessments, urinalysis and urine culture were the most commonly performed procedures (97 and 90% respectively), whereas ultrasonography was the most commonly performed instrumental test (81%). An urodynamic evaluation was carried out in 48% of patients. The pad weight test was used in 5% of cases only. Interestingly, urinary diary was used sparingly (34%) despite the fact that most patients suffered from storage symptoms and incontinence. In general, the approach for newly diagnosed LUTS was similar also for previously diagnosed LUTS.

The 5 most frequent symptoms were: daytime frequency (71%), urgency (69%), urinary incontinence (67%), nocturia (59%) and feeling of incomplete voiding (52%). Of 493 patients suffering from urinary incontinence, 39% showed symptoms of stress incontinence, 31% of mixed incontinence and 28% of urge incontinence. Overall, storage symptoms were clearly predominant (97%) but voiding symptoms were relatively common too (62%).

The mean (SD) score of the bother for all symptoms detected with ICIQ-LF QoL was 5.6 (3.2) in a scale of 0 to 10. The degree of bother corresponded closely to LUTS intensity. The mean W-IPSS score and the mean single question QoL score were 12.4 and 4.1 respectively and a significant association was detected between them (r=0.43; p<0.0001). When the classical classification of IPSS used for the assessment of BPH symptoms was applied to W-IPSS, the frequency of mild (0-8), moderate (9-18) and severe (19-35) LUTS was 27, 50 and 17% respectively.

Fifty percent of the enrolled patients had previously been teated with non-pharmacological approaches and 18% with drugs, these latter consisting mainly of anticholinergics (47%). During the current visit, pharmacological treatment was prescribed to 34% of patients and non pharmacological (behavioural and neuromodulation) to 35%. Surgery was indicated to 16% of women. Non-pharmachological approaches were more frequently prescribed in patients with urinary incontinence (36%) and urinary retention (54%), while drug treatment prevailed in those with dry and wet overactive bladder (44%) and in those with chronic pelvic pain (33%). Interestingly, while anticholinergics were used in 49% of OAB-dry patients, they were prescribed to 81% of those with OAB-wet.

### **Conclusions**

There are few data on the prevalence of LUTS in Italian women. The present study is currently investigating the universe of female LUTS as they are managed in urology settings. There is a relevant percentage of female patients who self-refer to this specialist without previous clinical assessment. Although storage symptoms are the most common, as expected, a relevant proportion of patients shows also voiding symptoms. In general, bothersomeness and intensity of symptoms are well correlated. The most frequent diagnosis is urinary incontinence, in the large majority of cases with stress or mixed symptoms. Pharmacological and behavioural therapies are given in equal proportion (more than 30%), while surgery is prescribed to one sixth of the female LUTS population.

The follow-up visits at 1- or 2-year will allow to evaluate the evolution of the diseases and the appropriateness of treatments.