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BOTHER CAUSED BY NOCTURIA IN WOMEN

Aims of Study

Nocturia is a common lower urinary tract symptom in women. Though its incidence has been studied, the severity of nocturia has not been categorized based on degree of bother to the patient. The number of nighttime voids that defines clinically significant nocturia has yet to be established. The objective of this study was to establish how bothersome nocturia is and to determine whether the frequency of nocturia correlates with the degree of bother. Furthermore, we sought to determine if this correlation was affected by age or continence status and we attempted to establish criteria for mild, moderate, and severe nocturia.

<u>Methods</u>

The charts of 1214 neurologically healthy women that presented to a female urology office were reviewed. All women completed the American Urological Association Symptom Index (AUASI) as well as the symptom problem index (SPI). Question # 7 on the AUASI assesses the number of voids per night and Question # 3 on the SPI questionnaire assesses the bother of nighttime voiding. The correlation of these two variables was evaluated using a proportional odds model, in which the response for Question #3 on the SPI questionnaire is treated as a variable with ordinal scale.

Results

Mean age was 54.6 years (18-93). 87.3% of the women complained of waking at least 1 time per night to void. The patients' bother score increased as the number of nightly voids increased, irrespective of age. The proportional odds model showed that as the number of voids increases 1 value on AUASI, the odds of having an increase in bother increases 2.7 times (p<.0001)

	Degree of Problem (%)				
	None	Very	Small	Medium	Big
		Small			
0 (n=154)	78.6	3.3	5.2	7.1	5.8
1 (n=332)	43.7	28.3	15.7	7.5	4.8
2 (n=279)	16.1	20.4	25.1	27.2	11.1
3 (n=201)	14.4	6.5	18.9	29.9	30.4
4 (n=106)	3.8	6.6	9.4	22.6	57.6
5+	7.8	4.2	9.2	8.5	70.4
(n=142)					

Number of Voids

Conclusions

As the number of nighttime voiding episodes increases, the bother due to nocturia increases, independent of age. Based on the low level of bother from 1 voiding episode per night and the significant increase in bother when compared to 2 episodes per night, we propose that in general, clinically significant nocturia in women be classified as 2 or more episodes per night. We also suggest that based on bother scores, 2 episodes be considered mild, 3 episodes moderate, and 4 or more episodes severe nocturia.