

## **IS FREQUENCY/VOLUME CHART HELPFUL FOR POTENTIAL PROGNOSTIC INDICATORS OF OVERACTIVE DETRUSOR IN PRIMARY ENURESIS?**

### **Aims of Study**

Primary enuresis is usually divided into monosymptomatic and complicated primary enuresis (MPE and CPE) depending on whether bedwetting is the only symptom or is associated with diurnal incontinence. Overactive detrusor was found in 49% of patients in MPE and 79% in CPE (1). In recent years, the roles of the urodynamic tests in the diagnosis of different types of incontinence have been the subject of debate. Some of physicians initially use symptoms to presumptively diagnose previously untreated incontinence. The objective of our study was to determine frequency/volume chart and urodynamic in patients with MPE and CPE for prognostic criteria.

### **Methods**

The urodynamic records of 31 patients (mean age 19.6 years, range 6-72) with MPE and 39 patients (mean age 10.5 years, range 3-30) with CPE were reviewed. Frequency/volume chart and the prevalence of overactive detrusor were compared with the type of enuresis. The Mann-Whitney U test was used for comparison and a p value <.05 was considered significant.

### **Results**

The number of girls was more than boys in both MPE and CPE groups. The mean numbers of functional capacity, mean void number and maximal void in patients whom MPE: 170.6cc, 6.3 and 336.3cc, respectively, while 153.4cc, 6.9 and 271.7cc for patients with CPE. Urodynamic study showed that means cystometric capacity was 284.7cc for MPE while 162.7cc for CPE. Of 31 patients with MPE, 22(70.9%) showed overactive detrusor compared to 31 of 39 (79,4%) for patients with CPE. No parameters of frequency/volume chart were statistically significant for potential prognostic indicators of overactive detrusor (P>0.05).

### **Conclusions**

Our study showed that frequency/volume chart does not provide a useful assessment tool for overactive detrusor in clinical settings. Therefore, urodynamics are essential in order to define the underlying cause of wetting and to lead appropriate treatment modality.

### **References**

1)Medel R, Ruarte AC, Castera R et al. Primary enuresis:a urodynamic evaluation. BJU 1998;81:50-52