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# URINARY SYMPTOMS FOLLOWING UROGENITAL INFECTION TREATMENT

## Aims of Study

Irritative urinary symptoms, including frequency, urgency, urge incontinence and nocturia, are distressing and aspecific symptoms which may be associated to different conditions. Urogenital infection is one of the most common cause but rarely thoroughly investigated. Since the treatment, to be successful, should be tailored to the specific agent of such disturbances, it is of outmost importance to investigate with microbiological tests. The aim of this study was to evaluate the modification of irritative bladder symptoms after treatment on the basis of swab test results.

#### **Methods**

Women referred to a urogenital outpatient clinic were enrolled in this study. The reason for referral were infertility, irritative urinary symptoms, and recurrent urinary and genital infections. All the women underwent a hystory taken, gynaecological examination and vaginal, cervical and urethral swabs with specific culture even for Chlamydia and Mycoplasma. A specific treatment was prescribed on the basis of microbiological findings. Women were then reassessed at the end of the therapy and re-evaluated for their complaints. Data were then collected for the type of pathogen involved in infection and symptoms were correlated with them.

#### **Results**

One-hundred-and-seventy-seven women, with a mean age of 49 years (SD $\pm$  5yrs), were evaluated. Fourty-three percent were in menopause and 25.4% of them were on hormonal replacement therapy. Thirty-seven and nine percent of the investigated women complained of vaginal burning sensation, dyspareunia was present in 34.3% of cases, while 29%, and 28.8% of them complained of faul vaginal discharge and genital itching respectively. Ninethyone women(51.41%) complained also of urinary disorders and the prevalence of irritative bladder symptoms (urgency, urge incontinence and nocturia) is reported in table I. Vaginal swab was positive in 25.2% of cases, cervical swabs in 20.3% and urethral swabs in 15.8% of the women. In fourty-eight patients (92.3%) a specific antibiotic treatment was started on the basis of the microbiological test. At follow up (mean 2.8 months SD $\pm$ 1,5 mths) we observed an improvement in both genital and urinary symptoms, with a mean global reduction in symptoms of 18.4%, and an improvement in irritative bladder symptoms averaging 9.6%. Table I summarises the prevalence of urinary irritative symptoms before and after antibiotic treatment.

	URINARY	IRRITATIVE	BEFORE	TREATMENT	AFTER TREATMENT
	SYMPTOMS				
	Urgency		37.9%		26.3%
	Urge incontinenc	е	27.0%		18.5%
	Nocturia		38.4%		29.6%

Table I: Prevalence of urinary irritative symptoms before and after specific antimicrobic treatment

## **Conclusions**

The role of urogenital microbiological investigations in the workup of lower urinary tract disorders has to be further investigated. On the basis of these preliminary results a sistematic urogenital microbiological search in women with irritative bladder symptoms prior to invasive investigations or pharmacological treatment could be considered.

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