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HEALTH FACTORS ASSOCIATED WITH VOIDING SYMPTOMS IN OLDER MEN AND WOMEN

Hypothesis / aims of study

While several medical conditions have been reported to be associated with urinary incontinence and overactive bladder in particular, much less work has been done to explore health factors associated with urinary voiding symptoms (1). According to recent data, voiding symptoms are surprisingly common also in older women (2). The aim here was to determine health factors associated with voiding symptoms in older men and women. Considering the possible confounding effect of urge symptoms on the associations, the respondents reporting both urge and voiding symptoms were excluded from the analyses.

Study design, materials and methods

227 women and 171 men aged 70 years and over were examined in a population-based cross-sectional survey. The response rate was 93 %. Voiding symptoms were defined as reporting weakened and /or intermittent stream. Urge symptoms were defined as either having difficulty in getting to the lavatory in time and/or having a strong urge to urinate with urinary leakage. Cross-tabulations were used to describe the distribution of either separate or simultaneous urge and voiding symptoms in men and women. Age-adjusted and multivariate logistic regression models with Odds ratios (OR) and 95 % confidence intervals (CI) were used to examine the associations of multiple health factors with voiding symptoms only versus no urinary symptoms. In the analyses, the dichotomous voiding variable was the outcome variable.

Results

Of the men 44 % and of the women 32% reported voiding symptoms without urge symptoms, while 4 % of the men and 18 % of the women reported urge symptoms only. Combined voiding and urge symptoms were reported by 28 % of the men and 26 % of the women. In the age-adjusted logistic regression models neurological diseases (OR 3.0; 95 % CI 1.14-7.80) and musculoskeletal diseases (OR 3.27; 95 % CI 1.28-8.35) were associated with voiding symptoms in men. In women, constipation (OR 3.97; 95 % CI 1.60-9.89), urinary tract infections (OR 3.11;95 % CI 1.27-7.63), polypharmacy (OR 1.19; 95 % CI 1.02-1.38), use of sleeping medication (OR 2.74; 95 % CI 1.25-6.00), joint or back pain (OR 2.58; 95 % CI 1.07-6.22) and musculoskeletal diseases (OR 4.24; 95 % CI 1.78-10.1) were the associates. In the multivariate analyses where all the health factors were simultaneously adjusted for, neurological diseases in men (OR 5.72; 95 % CI 1.19-27.45) and constipation (OR 3.83; 95 % CI 1.29-11.38) and musculoskeletal diseases (OR 4.18; 95 % CI 1.16-15.10) in women remained significantly associated with voiding symptoms.

Interpretation of results

In this cross-sectional study, several health factors appear to increase the risk of voiding symptoms especially in older women. The finding may imply that in men the symptoms are mainly explained by the prostatic obstruction.

Concluding message

Even though less bothersome than storage symptoms, voiding symptoms are significant in that they may be suggestive of voiding difficulties. In addition to paying attention to the lower urinary tract function, a comprehensive evaluation of concomitant diseases and medications is needed in the assessment of voiding symptoms in older men and women.

References

- 1) Association of non-urological diseases with lower urinary tract symptoms. Scand J Urol Nephrol 2001; 35(5):377-81.
- 2) Urgency, urge incontinence and voiding symptoms in men and women aged 70 years and over. BJU int 2002; 89(4):350-5.