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Shimizu N[1], Matsumoto S [1], Hanai T[1], Yoshioka N[1], Kurita T[1]
1. Kinki Univ School of Medicine

THE LONG-TERM EFFICACY OF ALPHA1-BLOCKER (TAMSULOSIN) IN MEN WITH BENIGN PROSTASTIC HYPERPLASIA

Hypothesis / aims of study

Benign prostatic hyperplasia (BPH) is a nonmalignant enlargement of the prostate which can result in bothersome lower urinary tract symptoms. The treatment goal
for men with BPH is to relieve these bothersome symptoms. The efficacy of alpha-1-blocker (Tamsulosin) for the treatment of lower urinary tract symptoms has been proven in numerous studies. However, little is known about the efficacy of the longer term. In order to evaluate the benefit of long-term medical treatment in BPH we retrospectively studied in selected BPH patients for whom has taken alpha1-blocker for at least 3 years or more.

Study design, materials and methods

A total of 107 patients were enrolled. All patients had taken alpha1-blocker by diagnosis of BPH for at least 3 years or more. The findings on uroflowmetry and the AUA symptom score (International Prostate Symptom Score (IPSS) and QOL score) before treatment were compared with those obtained at an annual results. For the indices of maximum urinary flow rate (Qmax), average urinary flow rate (Qave), IPSS, QOL were calculated.

Results

107 of them were Tamsulosin (0.2 mg/day). The average age was 71.6 years (range 57-83 years). The average volume of prostate was 26.7g (range 6-66g).

	Qmax		**Qave**		**IPSS Total**		**QOL**	
	mean	**sd**	**mean**	**sd**	**mean**	**sd**	**mean**	**sd**
Before treatment	10.29	4.97	5.09	2.52	13.58	7.31	3.84	1.26
1 year	12.37	5.61	6.00	2.69	12.36	5.94	3.35	1.13
2 year	11.62	4.99	5.77	2.65	14.91	8.27	3.79	1.44
3 year	11.54	4.99	5.77	2.42	11.84	6.23	3.36	1.12
5 year	11.52	4.96	5.84	2.67	13.51	7.51	3.44	1.33

Interpretation of results

Our data clinically and statistically allow to confirm the validity of long-term drug therapy for benign prostatic hyperplasia without a significant difference.

Concluding message

Long-term use is possible. Long-term treatment with Tamsulosin is safe and efficacy in patients with BPH.