483 Yoon H¹, Shim K W², Chung W S² 1. Ewha Womans University College of Medicine, 2. Ewha Womans University

PSYCHOSOCIAL STRESS AND OVERACTIVE BLADDER IN FEMALE

Hypothesis / aims of study

Chronic stress affects quality of life. Many patients with lower urinary tract symptoms (LUTS) complain that aggravation or recurrence of symptoms associated with physical or mental stress. This study aimed to investigate the correlation of stress and lower urinary tract symptoms in female.

Study design, materials and methods

From Oct. 2002 to Feb.2004, 480 female patients were entered to this study and 360 patients who completed the questionnaire and diagnosed as overactive bladder (OAB) were finally enrolled. As a control group, 150 female who visited to health care center for annual health exam, without any subjective illness or voiding symptoms. To assess stress status, Korean version of Brief Encounter Psychosocial Instrument (BEPSI-K) was used. To evaluate patients' lower urinary tract symptoms, Korean version of Bristol Female Lower Urinary Tract Symptom Questionnaire was used. Voiding diary, Urinalysis, Medical history taking, uroflowmetry, urodynamic study and physical examinations were performed to all participants. Data was analyzed by X^2 test and considered to be significant p<0.05.

<u>Results</u>

In BEPSI-K, cut off value to high risk stress was 2.4. Mean BEPSI-K score in OAB patient was 7.1. Mean quality of life score in lower urinary tract symptom questionnaire was 4.7. In the control group, mean BEPSI-K score was 1.2 and mean quality of life score was 1.3. These results were statistically significant when compared between OAB and control groups (p<0.05).

Interpretation of results

In this study, psychosocial stress shows significant correlation with the symptoms of overactive bladder. In consequence, in overactive bladder, life quality was also affected.

Concluding message

Many OAB patients experience aggravation or reappearance of symptoms associated with stressful conditions. In conclusion, to optimally manage OAB, clinicians should consider patients psychosocial stress status.