

GABAPENTINA TREATMENT IN FEMALE PATIENTS WITH OAB SYMPTOMS**Hypothesis / aims of study**

Aim of the study was to evaluate efficacy and tolerability of gabapentina in the treatment of OAB symptoms in female subjects.

Study design, materials and methods

23 patients (pts) (age 19-57 years, median 33,2) have been included in the study basing on the following criteria: no previous pelvic surgery, no genital prolapse, voiding diary (>7 micturitions/day with at least 3 urge episodes, urine culture, cystoscopy, flowmetry (max flow >18ml/sec, post-voiding residue <50 ml). Evaluation criteria have been assessed by King's Health Questionnaire and voiding diary at baseline and after 45 days of gabapentina treatment 900 mg a day.

Results

No pts reported side effects during the treatment. 23/33 pts reported good improvement of symptoms at the clinical post-treatment evaluation. Voiding diary showed a significant decrease of micturition daily episodes (>25%), while King'S Health Questionnaire showed a good improvement on quality of life. None pts presented modifications or increase of post-voiding residue. 4/10 pts who did not feel symptoms improvement from the treatment dropped out the protocol, 2/10 reported micturition frequency reduction but no changes in urgency, 1 pt reported significant decrease of urgency without significant lowering of frequency.

Interpretation of results

Preliminary studies on pts with neurogenic detrusor overactivity showed tolerability of gabapentina and its efficacy on reducing micturition episodes, and at the urodynamic study, the decrease of detrusor overactivity episodes and of their amplitude, with a strong improvement on the quality of life of these pts.

Concluding message

In this pilot study it has been demonstrated that also in female pts affected by irritative symptoms gabapentina can reduce the clinical pattern maintaining a good tolerability.

References

The use of gabapentin in the treatment of neurogenic detrusor overactivity: preliminary urodynamic and clinical results. G. Palleschi, R. Parasciani, P. Morello, A. Conte, V. Frasca, M. Inghilleri, A. Tubaro and A. Carbone.. ICS proceedings, Heidelberg, 2002.