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MONITORING OF UROFLOWMETRY IN PATIENTS WITH BPH USING DOXAZOSIN.

Hypothesis / aims of study

To work out a strategy for evolution of medical treatment of voiding dysfunctions in patients with BPH using ambulatory monitoring of uroflowmetry.

Study design, materials and methods

Ambulatory monitoring of uroflowmetry is a noninvasive method of evaluating of patients with LUTS and BPH. Forty five patients (mean age, 64,4 years) were examined using monitoring of uroflowmetry during 48 hours before and after the 4-weeks course of Doxazosin in dosage 4 mg. Each miction was registered. The mean number of mictions was 10,7. The main investigation goal was to evaluate the correlation between Qmax and Vcomp.

Results

Monitoring of uroflowmetry showed that with the beginning of Doxazosin therapy the impaired correlation between volume and Qmax was restored. In 45 patients we identified 23 patients with bladder outlet obstruction (Group 1) and 22 patients with irritative symptoms (Group 2). In patients of Group 1 where the obstructive type of voiding predominated, the effective volume of the bladder increased from 112 ml to 141.8 ml (20%) and the Qmax increased from 8.3ml/sec to 10.6 ml/sec (16%). In the second group the effective volume of the bladder increased from 135 ml to 232 ml (71%) and the Qmax increased from 10,1 ml/sec to 15,6 ml/sec (54,4%).

Interpretation of results

Our findings show that effect of Doxazosin on patients with bladder outlet obstruction and those with irritative symptoms is different. Rapid urodynamic changes in our patients prove fast action of alpha-blockers.

Concluding message

Monitoring of uroflowmetry is a simple and noninvasive method of evaluation of LUTS in patients with BPH. Application of this method in patients during the course of Doxazosin treatment may help to distinguish bladder outlet obstruction and irritative symtomps, which may predict the necessity of prolonged treatment or surgical intervention.