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DIFFERENCES IN IMPACT OF OVERACTIVE BLADDER ON QUALITY OF LIFE BETWEEN MEN AND WOMEN: RESULTS FROM THE MATRIX STUDY

Hypothesis / aims of study
The impact of overactive bladder (OAB) on quality of life (QOL) is well documented; however, gender differences have not been widely explored. This baseline analysis of the Multicenter Assessment of Transdermal Therapy in Overactive Bladder with Oxybutynin (MATRIX) study reports on comparative QOL and depression among men and women diagnosed with OAB.

Study design, materials and methods
The MATRIX study is an open-label, prospective, randomized trial in adult patients diagnosed with OAB. Patients are treated with transdermal oxybutynin over 6 months and evaluated for safety and patient-reported outcomes. Data are collected using validated instruments: the King's Health Questionnaire (KHQ); the Work Productivity Questionnaire (WPQ), an abbreviated version of the Work Limitations Questionnaire, scored on a scale of 0 (best) to 100 (worst); and the Beck Depression Inventory II (BDI-II), an assessment of the intensity of depression scored on a scale of 0 (best) to 63 (worst). Within the BDI-II, a score above 12 is associated with a diagnosis of clinical depression [1].

Results
To date, 2770 patients are enrolled in the MATRIX study. The mean age of the overall baseline population is 62.3 years (range: 18–100 years). Women make up 87.1% of the population (n=2413), with a mean age of 61.2 years (range 18–100 years). Men comprise 12.9% of the population (n=357), with a mean age of 69.7 years (range: 20–96 years). Eighty-five percent of men and 90% of women report that they experience urge incontinence.

Almost all patients report that bladder problems affect their lives (men 97% and women 98%). However, the mean KHQ summary score is higher in women than in men, indicating greater impairment in women (38.9 and 33.1 respectively, *P*<.0001). Women report greater impairment (*P*<.0001) in the following individual domains of the KHQ: role limitations, sleep/energy, and severity measures.

More women (n=990; 41.4%) than men (n=85; 23.9%) report working full- or part-time (*P*<.0001). The mean WPQ ability domain score is higher in women than in men, indicating greater impairment (27.5 vs. 20.0, *P*=.0258). Women also display greater impairment in certain components within the difficulty domain. More women than men report difficulty (50% or more of the time) in keeping their minds on their work (*P*=.02), concentrating on work (*P*=.006), and handling their workloads (*P*=.025).

The mean BDI-II summary score is higher in women (10.9) than in men (9.3) (*P*=.0036). The following components of the BDI-II are significantly more pronounced among women: crying (*P*<.0001), changes in sleep patterns (*P*=.0083), and changes in appetite (*P*<.0001).

Interpretation of results
Overactive bladder greatly impacts QOL in men and in women. However, baseline responses to the KHQ, WPQ, and BDI-II questionnaires in this study suggest that women are affected to a greater degree than men. These gender disparities in health-related QOL are similar to those seen in studies of other disease states, such as cancer [2] and heart failure [3].

Concluding message

Overactive bladder has a greater impact on health-related QOL in female patients than in male patients. These differences may be associated with disease severity.

References

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