Hypothesis / aims of study
The Multicenter Assessment of Transdermal Therapy in Overactive Bladder with Oxybutynin (MATRIX) study examined the safety and effectiveness of the oxybutynin transdermal system (OXY-TDS) in a community-based population of adults with overactive bladder (OAB) [1]. In this analysis, we describe participant perceptions of OXY-TDS and of their OAB condition during the MATRIX study.

Study design, materials and methods
This 6-month, open-label study at 327 US centres included individuals ≥18 years old with symptoms of OAB. Study participants were treated with OXY-TDS 3.9 mg/day (patch changed twice weekly). Global OAB severity was self-assessed with the Patient Perception of Bladder Condition (PPBC), which was administered at a baseline clinic visit and during monthly computer-assisted telephone interviews (CATIs) [2]. Perceptions of OXY-TDS were recorded during the same CATI calls; respondents previously treated for OAB were also asked to compare OXY-TDS with prior therapies.

Results
The study population (N = 2878) was mostly female (n = 2508; 87.2%) and Caucasian (n = 2406; 83.6%). The mean age was 62.5 ± 14.8 years (range, 18–100 y).

Global OAB severity at baseline was moderate or worse (PPBC score ≥4) in 78.2% of respondents (Figure 1). The fraction reporting moderate or worse OAB severity decreased to 42.8% by month 3 and to 36.3% by month 6 (both P < .0001 vs baseline).

Overall satisfaction with OXY-TDS at month 1 was 68.7% (“satisfied” or “very satisfied”) and increased slightly by month 3 (69.4%) and month 6 (73.1%) (Figure 2). Similar satisfaction levels were seen at months 1, 3, and 6 for ease of application (78.8%, 80.3%, and 83.1%), effectiveness (61.9%, 68.3%, and 72.3%), and ability to tolerate (80.5%, 76.9%, and 79.8%).
The patch was considered “convenient” or “very convenient” by most respondents at month 1 (75.3%), month 3 (76.3%), and month 6 (77.9%). During daily activities, most respondents were not aware of the patch (66.0%, 64.9%, and 72.3% at months 1, 3, and 6). Among those who were aware of the patch, it rarely affected daily activities (“never” or “infrequently,” 70.1%, 60.6%, and 61.3% at months 1, 3, and 6). Compared with prior treatments for OAB, OXY-TDS was reported by most respondents to offer “some benefits” or “significant benefits” at month 1 (62.3%), month 3 (66.1%), and month 6 (69.8%) (Figure 3). Similar results were attained at months 1, 3, and 6 for ease of application (67.0%, 71.1%, and 70.3%), effectiveness (57.2%, 61.8%, and 63.0%), and ability to tolerate (60.3%, 60.8%, and 62.6%).

**Interpretation of results**

Self-reported global OAB severity improved steadily during this 6-month study. Perceptions of OXY-TDS were favourable and stable during treatment. This is consistent with observed correlation between treatment satisfaction and overall perceived improvement in urinary incontinence [3].

**Concluding message**

Perceived OAB severity decreased significantly during the study. Most participants were satisfied with OXY-TDS throughout the treatment period. OXY-TDS was considered superior to other therapies by most of those previously treated for OAB.

**References**


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**HUMAN SUBJECTS:** This study was approved by the The protocol and supporting documents were approved by the institutional review board at each participating site. and followed the Declaration of Helsinki

**Informed consent was obtained from the patients.**