Abstract #122

THE MANAGEMENT OF OVERACTIVE BLADDER IN DAILY PRACTICE IN TURKEY: TURKISH CONTINENCE SOCIETY MULTICENTRIC STUDY

PHILADELPHIA

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Introduction

- ✓ OAB is a clinical diagnosis which is mainly based on patient history and symptoms. The European Association of Urology Guidelines for Urinary Incontinence recommends bladder diary, covering at least three days, within the context of diagnostic evaluation.
- ✓ However, bladder diary may sometimes be omitted due to a combination of patient and physician related factors. Guidelines recommend conservative approaches (lifestyle modifications, behavioral therapy, etc.) and antimuscarinic drugs or mirabegron as the first- and second-line treatment modalities, respectively. However, the application pattern of these treatments may vary among urologists.
- ✓ Turkish Continence Society aimed to analyze how OAB was being managed in daily practice by the urologists in Turkey. The initial management approaches and treatment strategies during the followup were investigated in this study.

Methods

- This multicentric study of the Turkish Continence Society was designed to represent the whole population so that randomly-selected 14 urology departments were included.
- ✓ The country was divided into 9 regions. Random hospitals were selected from these regions. At least one university hospital and one state hospital were selected in each region randomly.
- A total of **500 patients** were planned to be recruited after power analysis.
- ✓ An online data entry and storage software was created. After the ethics committee approval and the assignment of the usernames and passwords for each investigator, patient recruitment was initiated as of <u>January 2017</u>.
- ✓ The study included the demographic variables, initial data and first-year follow-up data of each patient.
- Adult patients (>18 years old) with the diagnosis of OAB were included.
- ✓ Exclusion criteria were;
 - History of lower urinary tract surgery,
 - Medical or surgical treatment due to BPH,
 - Diagnosis of prostate and/or bladder cancer,
 - Urinary tract infection,
 - Bladder stones.
 - Neurogenic bladder,
 - Bladder pain syndrome
 - Renal failure
- A survey including demographic data, daily habits, lower urinary tract symptoms and Turkish-validated OAB and ICIQ-SF questionnaires were given to all patients.
- ✓ Second part of the survey, including the questions about clinical evaluation and management of the patient, was completed by the treating physician.

	Men	Women	P value
ehavioral therapy			
Yes	73.2	81.4	0.063
No	26.8	18.6	
/ledical treatment			
Yes	89.3	86.1	
No	10.7	13.9	0.431

Table 2. OAB Scores of the patients at the initial recruitment (N= 507) and the outcome (N=356)						
Variables	Men	Women	p value			
OAB Score, mean, median, (range)	24.45, 25, (2-42)	26.13, 26, (2-40)	0.036*			
Overall, mean±SD, median(range)	25.76, 26, (2-42)					
OAB Score, mean, median, (range)	12.03, 11(2-32)	10, 8, (0-40)	0.006*			
Overall, mean±SD, median(range)	10.35, 8, (0-40)					

Results

- ✓ The data of 507 patients (394 females and 113 male) from 14 centers were included in this study.
- Mean age was 51.7 in female and 45.3 in male patients.
- Mean OAB scores were given in Table-2.
 The rate of wet OAB was significantly higher in female (87.6%) than in male patients (57.5%) (P=0.001).
- ✓ The degree by which quality of everyday life was affected according to ICIQ-SF questionnaire was significantly higher in female patients (P=0.001) There was a significant correlation between wet OAB and quality of everyday life (r = 0.77, P<0.001). This correlation was more pronounced in females (r = 0.81, P<0.001 for females and r = 0.64, P<0.001 for males).</p>
- ✓ Bladder diary was requested for 59.5% and 52.7% of the female and male patients, respectively.
- ✓ Initial management was presented in Table-1.
- ✓ There were 356 of 507 patients (70.2%) (63 males and 293 females) with a mean follow-up duration of 4 months. Medical treatment was continued in 78.9% of those male and 74.2% of female patients at the end of 4 months (P=0.403).
- Thirty percent of the patients did not come to their followup visits.
- ✓ Primary reasons for treatment modification were low patient satisfaction rate or treatment inefficacy which were reported by 18.8% of the female and 20.6% of the male patients (p=0.726).
- ✓ Antimuscarinic-related side effects occurred in 94.9% and 88.9% of the female and male patients, respectively (p=0.085) (Table-3). However, the rate of medical treatment change due to antimuscarinic-related side effects was only 1.7% in female and 4.8% in male patients.

TABLE-3. Patient satisfaction a	and need for treatme	nt modification after	initial treatment
Patient Satisfaction			
Not satisfied	6.5%	5.2%	
Not satisfied at all	3.2%	5.2%	
Little satisfied	19.4%	17.6%	0.706
Quite satisfied	46.8%	40.1%	
Very satisfied	24.2%	31.8%	
Treatment Modification	25.8%	21.1%	0.403
Inefficacy	20.6%	18.8%	0.726
Patient noncompliance	0%	1%	N/A
Side effects	4.8%	1.7%	0.153
Side Effect Rate	88.9%	94.9%	0.085

Conclusions

- ✓ This is the first study investigating the management of OAB in daily practice by urologists in Turkey.
- ✓ Bladder diary was used in more than half of the patients as a diagnostic tool. Behavioral therapy and antimuscarinics were the commonly preferred initial treatment modalities of OAB.
- ✓ Although antimuscarinic-related side effects were highly prevalent, this did not lead to high rates of treatment discontinuation, at least at short-term follow-up.
- ✓ Results of this study and similar prospectively designed future trials would be helpful to better understand the daily practice routines regarding the management of OAB.

References

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