

THE RELATION BETWEEN THE OVERACTIVE BLADDER SYMPTOM SCORE (OABSS) AND THE OVERACTIVE BLADDER QUESTIONNAIRE (OAB-Q)

Hypothesis / aims of study

Overactive bladder (OAB) is characterized by symptoms of urinary frequency and urgency, and has been shown to have significant impact on health-related quality of life (HRQL). The overactive bladder questionnaire (OAB-q) is a useful tool for measuring OAB-related HRQL in clinical management ¹⁾. The overactive bladder symptom score (OABSS), which integrates four OAB symptoms (daytime frequency, nighttime frequency, urgency and urgency incontinence) into a single score, was developed as a symptoms assessment tool ²⁾. There was no report that discussed relations of OABSS and OAB-q till now. This study compared the OABSS with the OAB-q and examined the responsiveness of anti-muscarinic treatment.

Study design, materials and methods

OAB patient were treated with solifenacin 5 mg daily for 4 to 12 weeks. The OABSS and the OAB-q were collected at pre- and post-treatment. The relation between the OABSS and the OAB-q and responsiveness of anti-muscarinic treatment were analyzed using Spearman rank correlation coefficient.

Results

A total of 57 patients enrolled (mean age = 73.0 years, 56.6% female, 73.3% OAB wet). The average point of sum score of the OABSS, daytime frequency, nighttime frequency, urgency, and urgency incontinence before therapy was 8.4, 1.1, 2.2, 3.2, and 2.0 respectively. In a point of OAB-q subscale before therapy, the average of symptoms bother, coping, concern, sleep, social interaction, and HRQL total was 33.7, 68.9, 74.4, 72.2, 82.5, and 73.9 respectively. Before therapy, the sum score of the OABSS was significantly correlated with all OAB-q subscales except for social interaction. Correlation with OAB-q at pre-treatment was examined, which was greatest for the sum score of the OABSS, followed by urgency, nighttime frequency, urgency incontinence, and daytime frequency. After treatment, significant improvements occurred in all OAB-q subscales ranging from 8.5 (social interaction) to 16.7 (coping). The sum score of the OABSS was significantly reduced (2.3) after therapy. Daytime frequency (0.4), nighttime frequency (0.5), urgency (1.0), and urgency incontinence (0.5) were also significantly reduced.

Interpretation of results

The OABSS had a significant correlation with individual OAB-q subscales. Anti-muscarinic treatment had improved both OABSS and OAB-q.

Concluding message

OAB symptoms have correlation with OAB-related HRQL and symptom bother. The OABSS appears to be a useful outcome measure for evaluating treatment-related change in clinical trials and practice with OAB patients as well as the OAB-q.

References

- 1) Qual Life Res (2002) 11; 563-574
- 2) Urology (2006) 68; 318-323

<i>Specify source of funding or grant</i>	none
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	none
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes