991

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MEDICAL THERAPY IS PERCEIVED AS MOST HELPFUL BY PATIENTS WITH INTERSTITIAL CYSTITIS

Hypothesis / aims of study

To evaluate perceived response to treatment in patients diagnosed with interstitial cystitis (IC).

Study design, materials and methods

A retrospective database review and telephone survey was conducted at a reference Urogynecologic center. The records of 212 confirmed IC patients were identified of which 122 patients completed a telephone survey (58%) to confirm results. Of the 122 patients, 37 (30.3%) had a diagnosis of IC alone, 54 had one concomitant disorder (44.3%) and 31 had > one concomitant disorder (25.3%). Patients were given a list of treatments and were asked to rate which treatment was most effective in relieving their symptoms related to their chronic pelvic pain (CPP) and IC. Not all patients received all therapies. IRB approval was obtained.

Results

Treatments of interest were diet, pentosan polysulfate (PPS), intravesical heparin, or other (neuromodulation). Cystoscopy with hydrodistension and dimethyl suloxide (DMSO) were not offered to this patient cohort. Patients ranked PPS (29.6%), diet with PPS (23.5%), and intravesical heparin with PPS (15.7%) as most helpful in improving their symptoms related to the chronic pelvic pain and IC. Diet alone was judged as helpful in only 5.2%. Despite the fact that 85 patients (69.7%) had IC and concomitant disorders, surgery was not judged as particularly helpful compared to medical therapy in relieving chronic pain symptoms.

Interpretation of results

A large group of patients with IC were studied. Standard therapies both medical and surgical were given within this cohort. Medical therapies aimed at treating bladder symptoms were subjectively perceived as more beneficial over surgical therapies aimed at concomitant disorders (e.g. laparoscopy, neuromodulation)

Concluding message

Patients with IC with or without concomitant disorders perceive medical therapy with PPS alone, PPS with diet modifications, and PPS with intravesical heparin as most helpful in relieving their chronic pelvic pain and IC symptoms. Surgical therapies were judged by those patients who received both medical and surgical therapy, as less helpful.

Specify source of funding or grant	Ortho McNeil unrestricted educational grant
Is this a clinical trial?	Yes
Is this study registered in a public clinical trials registry?	No
Is this a Randomised Controlled Trial (RCT)?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
Specify Name of Ethics Committee	IEC (Independent Speaker's Ethics Committee) C2002-036
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes