

# The Persian Version of the Acute Cystitis Symptom Score (ACSS) in Women with Uncomplicated Acute Cystitis:

is a highly accurate (97% sensitivity, 96% specificity), reliable, and valid tool for diagnosing and monitoring uncomplicated acute cystitis

Hanieh Salehi-Pourmehr; Sakineh Hajebrahimi; Kamaledin Hassanzadeh; Nasim Sharifzadeh; Mohsen Mohammad RahimiKurt G Naber; Jakhongir Alidjanov; Adrian Pilatz; Florian M Wagenlehner

- Department of Urology, Faculty of Medicine, Tabriz University of Medical Sciences, Tabriz, Iran.
- Department of Urology, Technical University of Munich, 80333 Munich, Germany
- Clinic of Urology, Pediatric Urology and Andrology, Justus Liebig University Giessen, 35390 Giessen, Germany
- Research Center for Evidence-Based Medicine, Iranian EBM Centre: A JBI Centre of Excellence, Faculty of Medicine, Tabriz University of Medical Sciences, Tabriz, Iran.

## Background

This study aimed to translate and validate the Acute Cystitis Symptom Score (ACSS) into Persian (Farsi). The hypothesis was that the Persian ACSS would show high reliability and validity in distinguishing women with uncomplicated acute cystitis (uAC) from healthy controls, and in monitoring treatment outcomes.

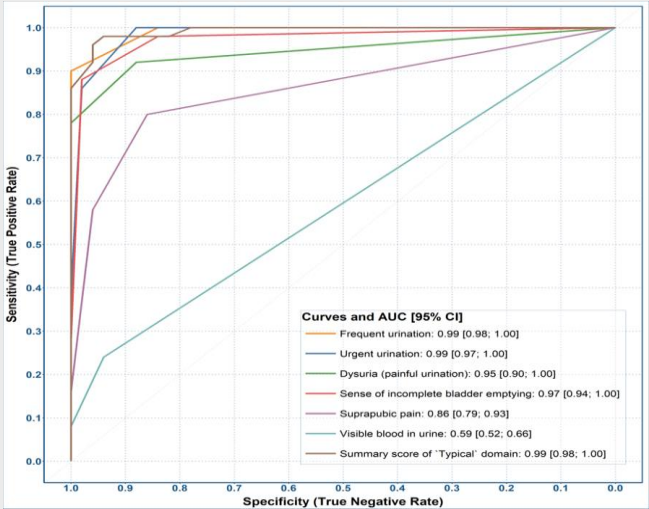


Figure 1. ROC analysis on the “Typical Domain” score at baseline (Controls=50, Patients at BL=50)

## Methods

A prospective, cross-sectional, observational cohort study was conducted with 100 Persian-speaking women: 50 with clinically and microbiologically confirmed uAC and 50 age-matched controls. The ACSS was linguistically validated following international guidelines. Patients completed the questionnaire at baseline (BL) and post-treatment follow-up (FU); controls only at BL. Analyses included internal consistency, diagnostic performance (sensitivity, specificity, accuracy, ROC), and group comparisons of ACSS scores.

## Results

The Persian ACSS showed good internal consistency. ROC analysis of the “Typical” domain (cut-off >6) yielded a sensitivity of 97% and a specificity of 96%. Significant differences ( $p < 0.05$ ) were found in “Typical,” “Differential,” and “Quality of Life” domains between patients and controls. At FU, uAC patients reported significant improvements in symptoms and QoL, though some scores remained worse than controls. 75% of patients reported feeling “back to normal” or “much better.”



Figure 2. Comparison of “Typical, Differential, and QoL Domain” summary scores between controls (n=50) and patients (n=40) at the Baseline (BL) and Follow-up (FU) Visits (the average interval between the two visits was 10 days).

## Implications

The Persian ACSS demonstrated excellent reliability, validity, and diagnostic accuracy for uAC. It effectively monitored treatment outcomes but also revealed residual symptom burden in some patients, indicating the need for comprehensive care. Findings are consistent with validations in other languages.