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URODYNAMIC STUDIES OF OVERACTIVE BLADDER (OAB) WITH OR WITHOUT STRESS URINARY INCONTINENCE (SUI) IN WOMEN

Hypothesis / aims of study

To investigate the urodynamic changes in female OAB with or without SUI.

Study design, materials and methods

Urodynamic studies were performed in 76 women with OAB. According to history and complaints, all the cases were divided into two groups. Group I (age=57±12y) with pure OAB, whose manifestations were frequency, urgency, and/or urgency incontinence; Group II (age=53±8y) were frequency, urgency, and/or urgency incontinence, with abdominal leakage point pressure (ALPP). The urodynamic results were compared between two groups.

Results

First desire to void, strong desire to void and maximum cystometric capacity in group I were significant lower than those in group II ($P<0.05$); Maximal urethral pressure, maximal urethral closure pressure and functional urethral length in group II were significant lower than those in the group I ($P<0.05$); Additionally, 2 cases (5%) had genuine stress incontinence (GSI), 26 cases (68%) had detrusor overactivity (DO), 2 cases (5%) had GSI plus DO in group I, but in group II were observed in 23 (62%), 8 (20%) and 4 (10%), respectively. The percentage of GSI and DO were significant different between the group I and II ($P<0.05$).

Interpretation of results

Urodynamic study showed more sensitive sensation, smaller bladder capacity and unstable contractions during filling cystometry in group I. Urodynamic study showed normal sensitive sensation and bladder capacity, less unstable contractions during filling cystometry and lower maximal urethral pressure, maximal urethral closure pressure and functional urethral length in group II.

Concluding message

Patients in the OAB+SUI group had more impaired urodynamic parameters than those in the OAB group. Urodynamic test should serve as an essential part of diagnosis and management on female with OAB, which can identify whether patient, combined the coexistent bladder dysfunction simultaneously. It can be of great benefit to clinical diagnosis and treatment on OAB.

Disclosures

Funding: NONE **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Ethics Committee of The First Affiliated Hospital of Zhengzhou University **Helsinki:** Yes **Informed Consent:** Yes