

FLEXIBLE-DOSE ANTIMUSCARINIC TREATMENTS IN NORMAL CLINICAL PRACTICE

Hypothesis / aims of study

To define the profile of patients with overactive bladder (OAB) who were on flexible-dose antimuscarinic treatment in normal clinical practice.

Study design, materials and methods

This was an epidemiological, observational, retrospective and multicenter study. Male/female patients ≥ 18 years, diagnosed with OAB, who were on flexible-dose antimuscarinic treatment during at least 8 weeks between their second visit to physician (visit -1) and the study visit were included. Socio-demographic and clinical characteristics were collected at the single study visit. Patients had to complete the Overactive Bladder Questionnaire Short Form (OAB-qSF), the Patient Perception of Bladder Condition (PPBC) scale, the Urgency Perception Scale (UPS), and the Treatment Benefit Scale (TBS). Adherence to medication was assessed using the Morisky-Green test. Dosage and/or treatment change, as well as reason for switching, were also recorded at visit -1 and at the study visit.

Results

A total of 897 patients were analyzed. Socio-demographic and clinical characteristics at the study visit according to dose change at visit-1 are summarized in Table 1. The population was about 61 years of age, with predominance of women and with nearly 20% suffering from obesity. Approximately 80% of the patients had at least one concomitant disease. Compared with the dose-change group, patients who did not change presented a significantly lower mean of OAB evolution time and incontinence ($p < 0.001$, Table 1). Furthermore, the patient-perceived bother occasioned by the OAB symptoms and their impact on health-related quality of life according to the OABq-SF, the subjective impression of their current bladder according to the PPBC, as well as the perceived urinary urgency according to the UPS was significantly better in the patients without dose change as well ($p < 0.001$, Table 1). At the study visit, 8 weeks after switching dose, the proportion of patients that stated to be improved with the treatment was similar, both in those that required dose change and those that did not (85.4% vs. 88.4%; $p > 0.05$, Table 1).

Overall, 424 (47.3%) patients needed dose change at visit-1 due mainly to lack of effectiveness (76.2%) followed by side effects (13.0%). At the study visit, 69.8% of the total patients did not change treatment, while the remaining 271 (30.2%) required switching of antimuscarinic drug (70.8%) or dose (29.2%); as occurred at the prior visit, lack of effectiveness led to switch in most of the cases (63.8%), followed by side effects (21.4%). Compliance rate was higher among those patients who did not require dose change at visit -1 (51.8% vs. 42.2%, $p = 0.004$).

Interpretation of results

Patients requiring dose change seem to be those with poor OAB condition. Flexible-dose antimuscarinic can provide the dose change that nearly half of the patients needed due mainly to lack of effectiveness of the initial dose. Nearly 90% of both groups of patients reported improvement with the treatment.

Concluding message

Patients with poor OAB condition could benefit from flexible-dose antimuscarinic in daily practice.

Table 1. Socio-demographic and clinical characteristics at the study visit

	Dosage change at visit -1		p
	Yes N=424	No N=473	
Age, mean (SD)	61.1 (11.6)	61.5 (12.5)	0.470
Sex, female, n (%)	318 (75.0)	348 (73.0)	0.626
Body mass index > 30Kg/m ² ,n (%)	82 (22.3)	77 (20.2)	0.476
Concomitant diseases, n (%)	368 (86.8)	382 (80.8)	0.015
Evolution time of OAB (months), median (range)	8.5 (6.2-18.2)	7.4 (4.2-17.4)	<0.001
Incontinence, n(%)	212 (50.0%)	144 (30.7%)	<0.001
OAB-qSF score, mean (SD)			
OAB bother severity (range 0-100)	35.5 (21.0)	29.7 (18.7)	<0.001
HR-QOL (range 0-100)	67.9 (20.0)	73.5 (18.3)	<0.001
PPBC, n (%)			<0.001
My bladder condition does not cause me any problems	27 (6.4)	62 (13.1)	
My bladder condition causes me mild /very mild problems	196 (46.2)	257 (54.4)	
My bladder condition causes me moderate problems	123 (29.0)	120 (25.4)	
My bladder condition causes me severe/many severe problems	78 (18.4)	34 (7.2)	
UPS, n (%)			<0.001
I am usually not able to hold urine	88 (20.8)	55 (11.6)	
I am usually able to hold urine until I reach the toilet if I go immediately	245 (57.8)	256 (54.1)	
I am usually able to finish what I am doing before going to the toilet	91 (21.5)	162 (34.2)	
TBS, n (%)			0.257
Greatly improved/Improved	366 (85.4)	418 (88.4)	
No change	57 (13.4)	51 (10.8)	
Worsened during the treatment	1 (0.2)	4 (0.8)	

SD: standard deviation; OABqSF: Overactive Bladder questionnaire Short Form ; Health-related quality of life (HR-QOL)

PPBC: Patient Perception of Bladder Condition ; UPS: Urgency Perception Scale; TBS: Treatment Benefit Scale

Disclosures

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