In OAB Patients with Nocturia the Degree of QOL Disturbance and Effects of Anticholinergics on QOL are Equal Between Gender

Introduction and Objective: It is well known that nocturia is correlated with poor sleep and health conditions. The objective of this study is to examine the difference of gender on the effects of anticholinergic agent, imidafenacin (IM) for OAB patients with nocturia.

Materials and Methods: Total of 165 (mean age; 68.8 years old) Japanese OAB patients who had more than two nocturnal voids per day were enrolled in this study. The design was prospective, single-dose, one arm with 8 weeks active treatment period. All of the patients received an IM oral tablet (0.1mg) twice daily for 8 weeks. OAB symptoms were assessed using a frequency volume chart (FVC) and the Overactive Bladder Symptom Score (OABSS). Sleep disorders were assessed using the Pittsburgh Sleep Quality Index (PSQI) and QOL was assessed using the Nocturia Quality of Life Questionnaire (N-QOL). For statistical analysis, Wilcoxon signed-rank test, ANOVA, Fisher's exact test and Spearman's Rank Correlation Test were used, and p value <0.05 was considered statistically significant.

Results: Sixty-seven (44.7%) males and 83 (55.3%) females were assessed for this analysis. Male patients were older than female patients. A significantly higher nocturnal void volume was observed in males. Nighttime voids was significantly higher in male (4.2±1.6/night) compared with female (3.4±1.1/night). PSQI score was significantly lower in male (6.0±3.3 points) compared with female (7.2±3.5 points). On the other hand, urgency incontinence was significantly higher in females (1.2±1.6 times) compared with males (0.7±1.5 times). Regarding the N-QOL, the overall scores, subscale (sleep/energy and bother/concern) scores and overall well-being were not significantly difference between males and females. After 8 weeks of treatment with IM, nocturnal voiding frequency, OABSS, PSQI and N-QOL score were significantly improved in both groups. The improvements of nocturnal score, urgency incontinence score and total score in OABSS were significantly higher in females than in males. In addition, there were significant correlations among the changes in nocturnal voiding frequency, N-QOL and PSQI.

Conclusion: It is clear that the degree of QOL disturbance is equal between genders. IM is effective for both male and female patients with both OAB and nocturia.