The association of pre-treatment factors with successful discontinuation of antimuscarinics in the treatment of overactive bladder symptoms

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목적: Women with overactive bladder symptoms do not continue with active treatments (antimuscarinics and behavioral therapy or combined with biofeedback therapy) due to lack of efficacy or side effects. It is unknown whether pre-treatment factors affects successful discontinuation and outcomes of long-term maintenance of active treatments. The aims of this study was to evaluate whether there is any difference in pre-treatment factors between successful discontinuation group and failure group with active treatments and to find out the predictors of successful discontinuation of active treatments.

방법: The clinical data of 125 patients with overactive bladder symptoms who had taken antimuscarinics and behavioral therapy were retrospectively reviewed. Antimuscarinics related outcomes were evaluated by an independent observer with telephone interview. All patients were asked about reason of maintenance or discontinuation of antimuscarinics. Mean follow-up was 39.6 months. To determine the predictors of successful discontinuation of antimuscarinics, multivariate regression analysis was performed.

결과: The proportion of successful discontinuation of antimuscarinics was 59.7% (74/125). Mean duration of use in successful discontinuation group was 3.3 months. The factors affecting successful discontinuation of antimuscarinics were age, parity, maximal flow rate at uroflowmetry, diabetes, menopause, history of operation for urinary incontinence. Increasing age was associated with failure of successful discontinuation of antimuscarinics.

결론: Patients who were younger, less parous, high maximal flow rate of uroflowmetry, non-diabetes, non-menopause, history of operation for urinary incontinence were associated with successful discontinuation of active treatments for overactive bladder symptoms.

Single port access bilateral laparoscopic orchiectomy in patient with androgen insensitivity syndrome - case report

유희준, 송수연, 신동기, 연지희, 이연아, 고영복, 양정보, 유헌종, 이기환

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We present a case of 18-year-old girl who had scant pubic and axillar hair with primary amenorrhea. Despite having normal female external genitalia, she had 4 cm deep blind-ending vagina, with the karyotype of 46, XY. Magnetic resonance imaging showed no uterus and localized bilateral intra-abdominal structures, which indicated bilateral testes. Hormonal tests brought the following results: FSH 6.63mIU/mL, and LH 33.77mIU/mL. Testosterone value met the normal for a male individual in reproductive age (5.81ng/mL). She was diagnosed with androgen insensitivity syndrome and underwent single port access laparoscopic bilateral orchiectomy through an umbilical incision. Her postoperative course was uneventful with less pain, and only a small surgical wound was at the umbilicus. Hormonal replacement treatment was initiated postoperatively. Single port access laparoscopy could be considered an effective surgical procedure for orchiectomy in androgen insensitivity syndrome.