## **Clinical impact of UDS for pelvic reconstructive surgery**

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Pelvic organ prolapse influences different functions at the same time. These disorders share many common risk factors and often coexist with one another. The report from the pelvic floor clinical assessment group of the international continence society (ICS, 2005) described the symptoms associated with pelvic floor muscle dysfunction as 5 groups: lower urinary tract symptoms, bowel symptoms, sexual function, prolapse, and pain.

Pelvic organ prolapse may be associated with lower urinary tract symptoms (LUTS). Urinary incontinence is one of the most common symptoms. Other common urinary symptoms may include overactive bladder (OAB), such as frequency, nocturia, urgency, and urgency incontinence; or voiding symptoms, such as difficulty with bladder emptying. Urodynamic studies play an important role in diagnosis and evaluation in patients with both pelvic organ prolapse and LUTS.

The initial evaluation of urinary incontinence in women includes a history, physical examination, urinalysis, and measurement of postvoid residual urine. The basic evaluation may be satisfactory for medical and conservative treatment. However, the International Scientific Committee of the Third International Consultation on Urinary Incontinence advised that for women who desire interventional treatment urodynamic testing is highly recommended.

Criteria for urodynamic studies for the patients with pelvic organ prolapsed and LUTS include uncertain diagnosis and inability to develop a reasonable treatment plan; consideration of surgical intervention; previous surgery failed; persistent symptoms of difficult bladder emptying; history of previous anti-incontinence surgery or radical pelvic surgery; abnormal postvoid residual urine; and a neurologic condition.

Women with pelvic floor muscle dysfunction present with a variety of bladder, bowel, and pelvic symptoms. Those symptoms impact a woman's daily activities and negatively affect her quality of life. Proper urodynamic studies are helpful for the evaluation and diagnosis of pelvic floor dysfunction with LUTS, especially for the patients with complicated symptoms before surgical intervention.