

The Clinical Diagnosis Treatment and Update of OAB

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膀胱過動症 OAB

Urgency, with or without urgency incontinence, usually with frequency and nocturia, *in the absence of pathologic or metabolic factors that would explain these symptoms*

Urgency: Compelling need to pass urine, which is difficult to defer

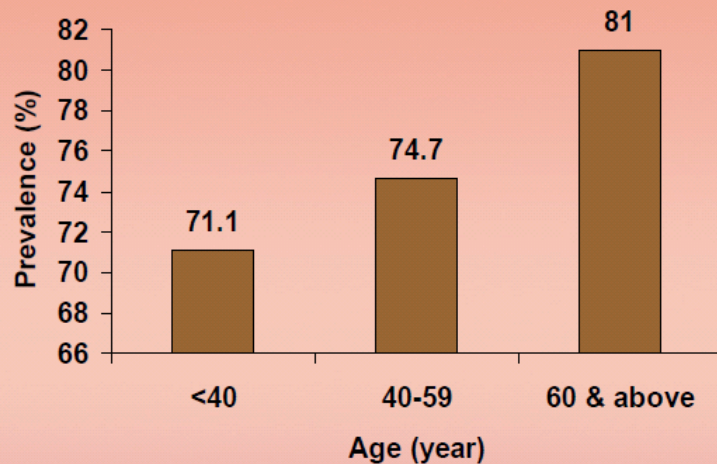
Urge: Desire, sensation experienced during micturition, considered normal



Chinese EPIC Study

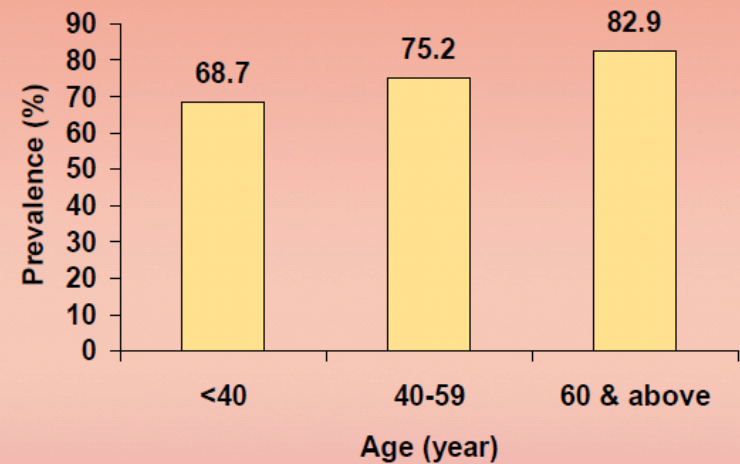
Prevalence of Any LUTS Among Women by Age Group

- Overall prevalence of any LUTS was 73.6%.



Prevalence of Any LUTS Among Men by Age Group

- Overall prevalence of any LUTS was 72.7%.



Urgency

- The pivotal symptom
- The complaint of a sudden compelling desire to void that is difficult to defer



Evaluation of OAB – History & PE

1. Presence or absence, incidence, severity, bother and effect on quality of life for each of the OAB symptoms including urgency incontinence. Other LUTS should also be assessed.
2. Presence or absence of dysuria and hematuria.
3. Nature and volume of fluid intake.

Guideline Statements - Diagnosis

1. The clinician should engage in a diagnostic process to document symptoms and signs that characterize OAB and exclude other disorders that could be the cause of the patient's symptoms; the minimum requirements for this process are a careful history, physical exam, and urinalysis.

Clinical Principle

1. In some patients, additional procedures and measures may be necessary to validate an OAB diagnosis, exclude other disorders, and fully inform the treatment plan. At the clinician's discretion, a urine culture and/or post-void residual assessment may be performed and information from bladder diaries and/or symptom questionnaires may be obtained.

Clinical Principle