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Can Lifestyle Modification on drinking and voiding habit helps treating Lower Urinary Tract Symptoms in male patients?

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Introduction

Lower urinary tract symptoms (LUTS) such as incomplete emptying, frequency, intermittency, urgency, weak stream, straining and nocturia are the common problems affecting men, especially the aging group. Common causes of LUTS usually derived from prostatic obstruction and bladder functional problems. Lifestyle modification on drinking habit like regular fluid intake, avoidance of alcohol and caffeine coupled with voiding habit such as deferment of voiding are the first line treatments for LUTS.

Objectives

To explore the effectiveness and limitation in treating LUTS by modifying patient's drinking and voiding habit.

Methodology

From August 2013 to December 2013, male patients suffering from LUTS and received the Lifestyle Modification Therapy were studied retrospectively. The International Prostate Symptom Score (IPSS) were used and result was analyzed by SPSS version 20.0 using paired t-test.

Result

51 male patients with mean age of 60 years presented with LUTS were retrieved. The mean year of experiencing LUTS is 4.5 years. Results revealed that the symptoms of incomplete emptying, urinary frequency and urgency could be significantly improved by lifestyle modification (p<0.05). However, although the mean score of intermittency (from 1.31 to 0.98; p=0.120, SD 1.50), weak stream (from 2.14 to 1.61; p=0.069, SD 2.03) and straining (from 1.33 to 1.04; p=0.193, SD 1.59) reduced after the therapy, the results are not reflected significant statistically. Lifestyle modification on drinking and voiding habit could help to improve some of the LUTS but not all. Storing symptoms such as urinary frequency and urgency seem to be treated better than voiding symptoms such as intermittency, weak stream and straining. With limitations of this study including small sample size and lack of objective measures such as uro-flowmetry to evaluate effectiveness of the therapy, further study can be done in exploring the relationship of outcomes versus treatment given.