



OnabotulinumtoxinA Detrusor Injection Improves Female Sexual Function in Women With Overactive Bladder Wet Syndrome

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INTRODUCTION, AIM OF THE STUDY

The correlation between changes in sexual function and improvements in LUTD in patients treated with OnabotulinumtoxinA (onaBoNT-A) detrusor injection is unclear and limited only to women with neurogenic overactive bladder (OAB). Aim of the study is to evaluate the impact of onaBoNT-A injection on sexual function in women undergoing this treatment for idiopathic OAB wet.

MATERIALS AND METHODS

This is a pilot three-center observational study including women affected by idiopathic OAB wet refractory to standard conservative treatments and underwent onaBoNT-A injection.

Sexuality was assessed using the Female Sexual Function Index (FSFI) Italian version1.

To evaluate OAB symptoms:

- 3-day voiding diary;
- OAB screener questionnaire (OAB-S);
- International consultation on incontinence questionnaire short form (ICIQ-sf) were completed before and 3 months after onaBoNT-A injection.

Table 1. Results of the Female Sexual Function Index before and after treatment with onaBoNT-A injection.

FSFI		Desire	Arousal	Lubrication	Orgasm	Satisfaction	Pain	Total
Pre	Mean	3.2	2.75	3.34	3.0	3.3	4.6	20.30
	Median	3.0	2.7	3.0	3.2	3.2	4.8	20.35
	SD	1.07	0.74	0.91	0.82	0.92	0.96	3.50
								24.91
Post	Mean	3.62	4.0	4.20	4.0	4.4	4.21	
	Median	3.6	4.2	4.05	4.0	4.8	4.8	25.5
	SD	1.26	0.97	0.92	1.24	1.26	0.98	4.86
P*		0.28	<0.0001	*0.0084	0.002	0.003	0.99	0.0008

Table 2. Results of voiding diaries, OAB-S, and ICIQ-SF before and after onaBoNT-A injection.

		Voiding diaries: mean of micturition	Voiding diaries: leaks of urine (OAB)	OAB-S	ICIQ-sf
Pre	Mean	11.4	6.32	40.88	19.34
	Median	11	6	42.5	20
	SD	1.96	2.92	4.58	1.22
Post	Mean	5.86	1.5	18.19	8.88
	Median	6	1	15	8
	SD	1.29	2.22	9.99	4.88
P*		<0.0001	<0.0001	<0.0001	<0.0001

	Improvement of urinary symptoms (n.28/32)	No improvement of urinary symptoms (n.4/32)
OAB screener	PRE (mean)	POST (mean)
	39.7 ± 5.4	14.0 ± 3.2
ICIQ-sf score	PRE (mean)	POST (mean)
	19.0 ± 2.0	6.8 ± 2.7
Voiding diaries	PRE (mean)	POST (mean)
	5.4 ± 2.7	0.8 ± 0.9
FSFI Total score	PRE (mean)	POST (mean)
	19.6 ± 4.8	25.8 ± 4.2

Table 3. Correlation between urinary symptoms and the Female Sexual Function Index before and after treatment with onaBoNT-A injection.

	PRE (mean)	POST (mean)	PRE (mean)	POST (mean)
OAB screener	39.7 ± 5.4	14.0 ± 3.2	46.5 ± 1.7	42.3 ± 3.3
ICIQ-sf score	19.0 ± 2.0	6.8 ± 2.7	21.0 ± 0.0	20.0 ± 1.2
Voiding diaries	5.4 ± 2.7	0.8 ± 0.9	8.5 ± 2.6	5.0 ± 3.6
FSFI Total score	19.6 ± 4.8	25.8 ± 4.2	15.4 ± 1.0	15.5 ± 8.3

RESULTS

All the 32 enrolled patients were evaluable and included for statistical analysis. Mean age was 53 y.o. (26-68 y.o.). None of the women had previous pelvic surgery. These patients received 100U of onaBoNT-A. Significant improvement of many FSFI domains was found. Only desire and pain domains had no significant improvements. The FSFI total score showed a significant improvement (P 0.0008). Table 1 shows the results of the FSFI before and after treatment with onaBoNT-A injection. Clinical efficacy has been documented by voiding diaries, OAB-S scores, and ICIQ-sf scores (table 2). Correlation between UII episodes and FSFI total score was statistically significant (r= -0.73; p=0.04) while no significant correlation was found between number of micturition and FSFI total score. Correlations between urinary symptoms and the FSFI before and after treatment with onaBoNT-A injection are listed in table 3

INTERPRETATION OF RESULTS

We documented a significant correlation between the reduction of episodes of UII and improvement of FSFI total score. Voiding diaries and questionnaires on urinary symptoms showed a significant improvement after onaBoNT-A injection.

The most relevant urinary symptom reducing the sexual function was urge urinary incontinence.

The positive effect exerted by onaBoNT-A injection on urinary symptoms may have had a positive impact on the psychological status of the patients. Hence, women with a better control on OAB symptoms may have had a more gratification in the sexual intercourse. A greater self-confidence in sexual intercourses related to a better control of urinary leakages can explain the FSFI domains improvement.

CONCLUSIONS

Women underwent OnaBoNT-A detrusor injection to treat wet OAB, showed an improvement in sexual function due to the significant correlation between the improvement of urinary urge incontinence and a better gratification of sexuality.

REFERENCES

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