INTRODUCTION

Overactive bladder (OAB) is relatively common in the general population but more common in women, especially in postmenopausal women with the genitourinary syndrome of menopause (GSM).

AIM OF THE WORK

The aim of this study was to assess the efficacy of local estrogen hormone in improving the OAB symptoms in postmenopausal women with GSM.

PATIENTS AND METHODS

A randomized, double-blind, placebo-controlled was carried out on 56 patients with GSM with the complaints consistent with OAB and recruited from the urogynecology out-patient clinic, Department of obstetrics and gynecology at El Shatby Alexandria University Hospital. Patients were divided into two groups: Group (A) received 0.5 g of conjugated estrogen (Premarin vaginal cream) twice weekly for 8 weeks, and group (B) received a placebo at the same dose. All subjects were subjected to full history taking, questionnaire derived from the UDI-6 and IQ-7, clinical examination and investigations including complete urine analysis and urodynamic studies. After 8 weeks, patients in both groups were assessed again by a UDI-6 and IQ-7 and urodynamics, and the results of both groups were compared.

RESULTS

Follow up 8 weeks after treatment, there were statistically significant decrease in DTF and NTF in group A with p value <0.001. Percentage of reduction in DTF and NTF was statistically significant in group A compared with group B, with p value <0.001. There were statistically significant decrease in the incidence of urgency, the incidence of incontinence and the incontinence episodes with p value < 0.001, 0.004 and < 0.001 respectively in group A compared with group B that showed no significant difference. There was statistically significant decrease in UDI-6 score in group A (p<0.001), which means improvement in symptoms.

CONCLUSION

There was a statistically significant decrease in IQ-7 score in group A (p 0.001), indicating that patients’ quality of life improved. There was statistically significant increase in bladder capacity in group A (p<0.001). There was statistically significant delay in the first sensation of filling in group A (p<0.001). There was a statistically significant decrease in vaginal dryness sensation (p < 0.001) compared to group B (p = 0.020). There was a statistically significant decrease in dyspareunia in group A (p = 0.002).

Estrogen therapy, especially vaginal estrogen which has fewer systemic side effects than oral estrogen, appears to be helpful in managing OAB symptoms in postmenopausal women, improving both subjective symptoms and urodynamic parameters. Patients’ quality of life and emotional status improve significantly as a result of improving OAB symptoms with local estrogen.