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INTRODUCTION & OBJECTIVES: After radiotherapy for prostate cancer, up to 50% of patients can have nycturia (De Langhe S et al: Int J Radiat Oncol Biol Phys. 2013). Hyaluronic acid chondroitin sulfate (Ialuril®) represents the replacement of the protective lining in bladder known as Glycosaminoglycan, or GAG layer.

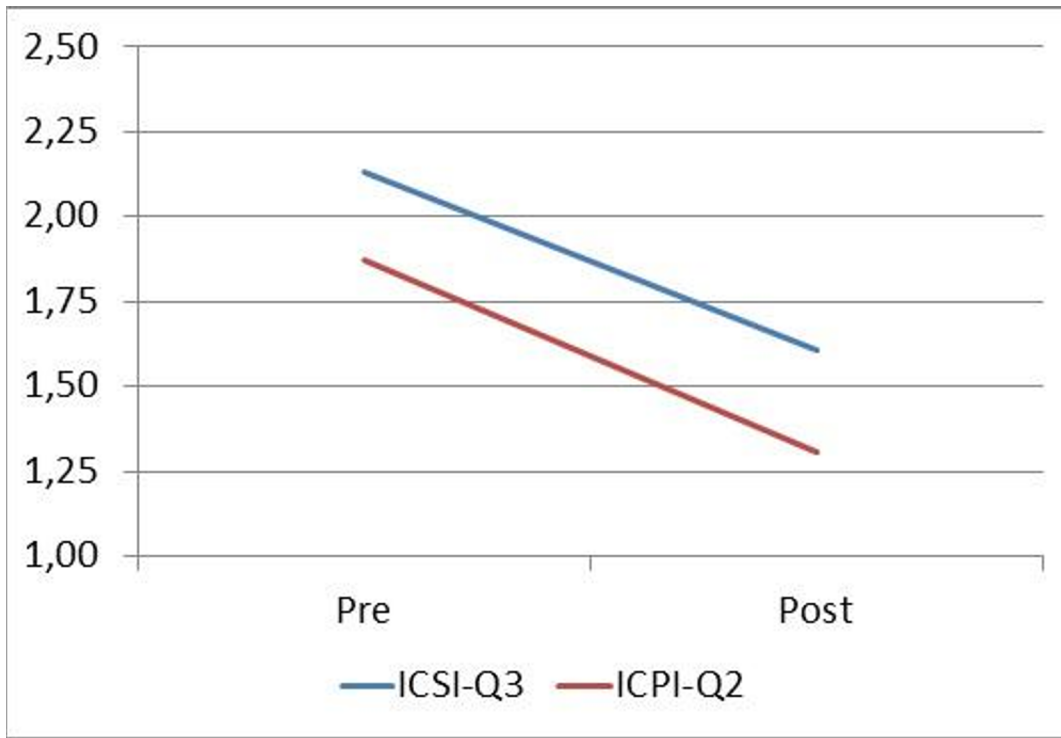
The aim of our study is to evaluate the impact of Ialuril® on symptom and bother related to nocturia, in men with bladder pain syndrome (BPS) after radiotherapy for prostate cancer.

MATERIAL & METHODS: Twenty-three consecutive patients (mean age: 67.9) with bladder pain syndrome due to pelvic irradiation for locally advanced prostate cancer (16 treated with radical prostatectomy plus radiotherapy and 7 with radiotherapy alone) were enrolled from May 2012 to October 2013. Patients underwent intravesical administration of Ialuril® weekly for the first month, and on the 6th, 8th and 12th week subsequently.

Nocturia was assessed by item 3 (Q3) of the Interstitial Cystitis Symptoms Index (ICSI, the “symptom” nocturia) and the item 2 (Q2) of the Interstitial Cystitis Problem Index (ICPI, the “bother” nocturia). Both questionnaires were self-administered immediately after RT and at the end of treatment with Ialuril (12th weeks) to evaluate the relapse of symptoms.

Data were analyzed with Paired samples T test, and subsequently adjusted for age, baseline ICSI-Q3, baseline ICSI Total score and age, ICPI-Q2, ICPI Total score in two separate logistic regression models.

RESULTS:



Mean \pm standard error of the mean pre and post-treatment ICSI-Q3 was 2.13 ± 0.28 and 1.61 ± 0.21 , (% of Delta pre-post: -24.4%, $p=0.001$). At logistic regression both age and baseline ICSI-Q3 had a negative impact on this item ($r=0.293$, $p=0.011$ and $r=0.970$, $p=0.000$). Mean \pm standard error of the mean pre and post-treatment ICPI-Q2 was 1.87 ± 0.26 and 1.30 ± 0.25 , (% of Delta pre-post: -30.5%, $p=0.016$). At logistic regression we did not find any significant data. (see Figure)

CONCLUSIONS: In challenging patients, with post radiation bladder pain syndrome, laluril® resulted effective in reducing the symptom nocturia and the relative Bother. Further RTCs are needed to confirm the result of this pilot study.