
البحث الثالث

Relation of baseline prostate volume to improvement of lower urinary tract symptoms due to tamsulosin monotherapy in benign prostatic hyperplasia: An exploratory, multicenter, prospective study

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(بحث غير مشتق من رسالة)

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English Summary

Purpose:

The aim of the study was to investigate the relation between baseline prostate volume (PV) and the improvement of lower urinary tract symptoms (LUTS) induced by tamsulosin monotherapy after 2-year follow-up in Egyptian benign prostatic hyperplasia (BPH) patients.

Patients and Methods:

Three hundred and eighty-one BPH patients were included in the study from January 2014 to January 2017. The patients were divided according to their PV into two groups. Group A included patients with small sized prostate (≤ 40 ml) and Group B included those with PV larger than 40 ml. Full evaluation was done at presentation. The patients are followed up at 6, 12, and 24 months of continued medical treatment with tamsulosin 0.4 mg once daily. Statistical Analysis was done to compare both groups

Results:

The mean age was 60.1 ± 7.2 years. The mean value of the International Prostate Symptom Score (IPSS) was recorded for the 381 patients at presentation. In Group A, the mean value of IPSS was 20.44 ± 3.18 , whereas in Group B, the mean value of IPSS was 21.23 ± 3.5 . There was a significant improvement in symptoms (Qmax-IPSS) in both groups, but we found that this improvement was significantly better in Group A ($P = 0.017$).

Conclusions:

PV is an important prognostic factor affecting the improvement of the LUTS by α 1-blocker monotherapy. Tamsulosin monotherapy may not be enough for large prostate (>40 mg) to maintain adequate symptom relief, and it is better to start with other medical options such as combined therapy.