

Urinary Symptoms Found to Differ by Ethnicity

BY DAMIAN McNAMARA

HOLLYWOOD, FLA. — Consider cultural sensitivity and context when counseling women who report lower urinary tract symptoms, researchers advised, based on their study of more than 2,000 ethnically diverse women.

Dr. Kier C. Van Remoortere and her colleagues interviewed 2,270 African American, Asian, white, and Hispanic women using a standardized questionnaire about lower urinary tract symptoms (LUTS), and also reviewed their medical records.

The prevalence of LUTS ranges from 17% to 67% in the literature, Dr. Van Remoortere said at the annual meeting of the American Urogynecologic Society.

Up to 40% of affected women are significantly bothered by their symptoms and report decreased quality of life.

Increases in emergency department visits, hospitalizations, and depression have been linked with LUTS, she said, but prior studies were limited to predominantly white or Asian patient populations.

Overall prevalence of any LUTS symptom was 37% in this study, said Dr. Van Remoortere, a fourth-year resident in the department of obstetrics, gynecology, and reproductive services at the University of California, San Francisco.

The study cohort was 44% white, 20% African American, 18% Asian, 17% Hispanic, and 1% Native American/other. All participants were adults, aged 40-79 years.

The participants ranked symptoms bothering them from “not at all” to “extreme.”

Quality of life factors varied between groups. For example, Hispanic women reported a greater impairment of quality of life if they had increased diurnal frequency, nocturia, or urgency, after household income, education level, age, body mass index, history of hysterectomy, and diabetes were controlled for.

Hispanic women were bothered more by increased diurnal frequency, for example, compared with African American women (odds ratio 2.0) and compared with whites (OR 1.5), according to a multivariate analysis.

This group also was more bothered by urgency symptoms than were African American (OR 1.9), Asian (OR 1.9), or white women (OR 1.5). “Overactive bladder wet,” however, did not have a significant impact on quality of life by ethnicity.

“It is important for clinicians to be sensitive to these cultural differences,” Dr. Van Remoortere said.

They also looked at differences in the prevalence of LUTS by ethnicity. The most distressing symptoms to patients—wetness from an overactive bladder (reported by 41%) and urgency (cited by 26%)—did not differ significantly by race in the study, Dr. Van Remoortere said.

African American women reported increased nocturia, compared with

Hispanic (OR 2.1), white (OR 1.8), or Asian women (OR 1.6). These differences among groups were statistically significant.

At the same time, African American women were significantly less likely to report distressing diurnal frequency symptoms, compared with Hispanic (OR 0.4), white (OR 0.5), or Asian women (OR 0.6).

LUTS were self-reported and no

standardized metric exists to assess these symptoms in women, a potential limitation of the study, Dr. Van Remoortere said.

In addition, the investigators had no information about participant profession. “Information on career [might be important because] control over one’s schedule is likely related to bother over lower urinary tract symptoms.” ■

VITALS

Major Finding: Quality of life among women with lower urinary tract symptoms varied by ethnic group, as did the prevalence of these symptoms.

Data Source: Interviews with 2,270 African American, Asian, white, and Hispanic women about lower urinary tract symptoms and a review of their medical records.

Disclosures: None reported.

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