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P51. ACUPUNCTURE FOR THE TREATMENT OF OVERACTIVE BLADDER: A SYSTEMATIC REVIEW OF THE LITERATURE.

Garcia-Rojo D (ES) [1], Centeno C (ES) [2], Vicente E (ES), Abad C (ES) [3], Hannaoui N (ES) [4], de Verdonces L (ES) [5], Parejo V (ES) [6], Capdevila M (ES) [7], Prera A (ES) [8], Gonzalez-Sala J L (ES) [9], Muñoz-Rodriguez J (ES) [10], Dominguez A (ES) [11], Rosado M A (ES) [12], Planelles P (ES) [13], Ferran A (ES) [14], Prats J (ES) [15] CONTEXT:

Overactive bladder (OAB) is defined by the presence of urgency, with or without urgency urinary incontinence (UUI), often accompanied by frequency and nocturia.

It has a significant negative impact on the quality of life of patients and their relatives or carers, as it affects the social, sexual, interpersonal relationships and work life.

It is estimated that 11% of the population has symptoms of overactive bladder during their lifetime.

## **OBJECTIVE:**

Overactive bladder is treated with antimuscarinic drugs or Beta-3-agonists, which have abundant side effects (dry mouth, blurred vision and constipation or mainly HTA) and low adherence to treatment (only 20% of the patients continue with anticholinergic treatment at 6 months)

We conducted a systematic review of the literature analyzing the role of acupuncture in the management of overactive bladder.

## METHODS:

A systematic review of the literature was performed using the PICO method (patient, intervention, comparison and outcome), with the aim of answering the following clinical question:

Å "What are the effects of acupuncture in the treatment of overactive bladder?"

We searched: Medline, Embase, The Cochrane Library, and other important databases up to March 2017. Key search terms were: acupuncture, overactive bladder, bladder instability, urgency, urinary incontinence, detrusor hypereflexia, detrusor overactivity, urodynamic study.

## **RESULTS:**

Among 128 articles, 45 were selected to be fully read.

The experience in humans includes seven case series and twelve randomised controlled trials (RCTs). Among this twelve RCTs articles, eight were found to be of reasonable quality.

All RCTs demonstrated subjective improvement in OAB symptoms, and three reported objective improvement in urodynamic studies (maximum cystometric capacity, first sensation of bladder filling, first

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urge to void).

Notably, six RCTs trials showed that benefit of acupuncture, used on its own or in combination with antimuscarinic drugs, was comparable whith the use of antimuscarinics alone.

However, minor side effects were observed only in 0.5-18% of cases.

## **CONCLUSIONS:**

The mechanism of action of acupuncture is not well established. Acupuncture may provide an efficacious treatment comparable to the antimuscarinic therapy, but with a more favorable side effect profile. However, further well-designed studies are required to determine optimal technique, long-term outcomes, and cost effectiveness.