



Extended Research Article

Invasive urodynamic investigations in the management of women with refractory overactive bladder symptoms: FUTURE, a superiority RCT and economic evaluation

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This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain language summary

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Plain language summary

Overactive bladder affects 12–14% of United Kingdom women. Initial treatments include lifestyle changes, pelvic floor exercises, bladder training and tablets. Sometimes these treatments do not work, with many women requiring more invasive procedures.

Before having these procedures, it is normal United Kingdom practice to have an invasive test called urodynamics.

Some women find urodynamics embarrassing and/or uncomfortable. After the test, some get cystitis (a urine infection) and in about one-third of women urodynamics does not show the cause of their overactive bladder symptoms. This may result in some women not being offered treatments which may help their condition.

In this study, 1099 women who were looking for invasive treatments agreed to take part. They were randomly allocated to receive urodynamics plus a clinical assessment (550 women) or a clinical assessment only (549 women). The clinical assessment included a detailed medical history, clinical examination, bladder diary and non-invasive tests. We compared the two groups by asking the women about their symptoms throughout the study.

Slightly fewer women in the urodynamics group received treatment during the study. Of those who did receive treatment, an injection of Botox into the bladder wall was the most common treatment in both groups. There was no difference in complications between the groups.

At the end of the study, women in both groups reported an improvement in their quality of life. The number of women who said their symptoms were 'very much improved' or 'much improved' was similar between the groups [117 women (23.6%) in the urodynamics group compared with 114 women (22.7%) in the clinical assessment only group]. The additional cost to the National Health Service in receiving urodynamics was £463.

The views of the women interviewed during the study varied, with some saying they were willing to have urodynamics if it helped with treatment decisions, while others were extremely worried about the discomfort and embarrassment of the procedure.

This study suggests that performing urodynamics before invasive treatment does not lead to an improvement in women's overactive bladder symptoms compared to comprehensive clinical assessment only (i.e. is not superior) and is more expensive. However, further work is under way to confirm this in the longer term

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This article

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