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[Intervention Review]

Anticholinergic drugs versus other medications for overactive bladder syndrome in adults

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ABSTRACT

Background

Overactive bladder syndrome is defined as "urgency with or without urge incontinence, usually with frequency and nocturia". It is a common condition with significant economic and quality of life implications. While the condition's pathophysiology remains to be fully elucidated, pharmacotherapy is the main treatment option. Despite uncertainty as to drug treatment of choice, anticholinergics are increasingly being used in primary and secondary care settings. This review compares anticholinergic drugs with other types or classes of drugs for treating overactive bladder syndromes.

Objectives

To compare anticholinergic drugs with other types or classes of drugs for treating overactive bladder symptoms.

Search methods

We searched the Cochrane Incontinence Group Specialised Trials Register (searched 20 December 2006) and the reference lists of relevant articles. No language or other limits were imposed.

Selection criteria

All randomised and quasi-randomised controlled trials comparing anticholinergic drugs with other drugs for the treatment of overactive bladder symptoms. At least one arm of the study used an anticholinergic drug and at least one other arm used a non-anticholinergic drug.

Data collection and analysis

Two reviewers assessed the identified studies for eligibility and methodological quality and independently extracted data from the included studies. Data analysis was performed using RevMan software (version 4.2.8).

Main results

Twelve trials were included in the review. There were seven crossover trials and five parallel group studies. For the comparisons between anticholinergic drugs with tricyclic antidepressants, alpha adrenergic agonists, afferent nerve inhibitors, and calcium channel blocker a single trial was identified for each. Nine trials compared flavoxate with anticholinergics. There was no evidence of a difference in cure rates between anticholinergics and flavoxate. Adverse effects were more frequent in anticholinergic groups versus flavoxate groups (RR 2.28 95% CI 1.45 to 3.56). There was no strong evidence to favour either anticholinergic drugs or the comparators.

Authors' conclusions

Many of the drugs considered in trials in this review are no longer used in clinical practice (and this includes the most commonly tested - flavoxate). There is inadequate evidence as to determine whether any of the available drugs are better or worse than anticholinergic medications. Larger randomised controlled trials in clinical settings are required to further establish the role of these medications in the management of overactive bladder syndrome.

PLAIN LANGUAGE SUMMARY**Drugs in overactive bladder syndrome**

Overactive bladder syndrome is characterised by a need to rush to urinate - urine is passed frequently and there may be incontinence. The main treatment option is drug therapy. The most commonly used drugs are anticholinergics, but these often have side-effects, such as dry mouth. This review sought evidence to compare other types of drugs with anticholinergics. Only a few, small-scale randomised trials were found, many testing drugs that are no longer used clinically. The review found inadequate evidence to assess whether or not available alternative drugs are better or worse than anticholinergics in the management of people with symptoms of overactive bladder syndrome.