

# OVERACTIVE BLADDER: COMPARISON OF THREE REHABILITATIVE APPROACHES

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**BACKGROUND** Overactive bladder (OAB) is a medical condition that encompasses symptoms such as impelling urgency, with or without urge incontinence, generally associated with urinary frequency and nocturia [1].

This study compares results obtained by applying three different rehabilitative approaches in women with OAB syndrome: perineal rehabilitation treatment, Fascial Manipulation® for Internal Dysfunctions [2] and the combination of both.

**METHODS** The study enrolled 15 women with OAB syndrome aged > 18 years (SD = 12.41). Exclusion criteria: neurological diseases, uncooperative patients, drug therapy for OAB in place, pubococcygeus test (PC test) = 0. All subjects underwent an initial and final assessment and the following parameters were taken into account: PC test (F, E1, E2; range: 0-3), Visual Analogue Scale (VAS), King's Health Questionnaire (KHQ-SF), Over Active Bladder Questionnaire - SF (OAB-q SF), micturition diary, pad test (30 minutes to 24 hours), stop test of uroflowmetry.

Subjects were assigned consecutively to three treatment groups that were homogeneous for size:

- Group A: perineal rehabilitation treatment (individual perineal physiotherapy associated with functional electrical stimulation, 10 sessions, two-three times a week);
- Group B: Fascial Manipulation® treatment (10 sessions, once a week);
- Group C: combined treatment (Fascial Manipulation® treatment followed by perineal rehabilitation)

**RESULTS** Data comparison showed a significant improvement in average scores of VAS and average scores of the KHQ-SF and OAB-q SF questionnaires in all subjects. In particular, the results for the KHQ-SF and part A of OAB-q SF were statistically significant ( $p < 0.05$ ) in group A. In group C a significant improvement ( $p < 0.05$ ) of the tonic muscle component (E1 and E2) was observed for the PC test. Concerning the micturition diary, in group A there was a significant improvement ( $p < 0.05$ ) in urination frequency and in group C in the average volume of urine.

**CONCLUSIONS** Despite the limitations of this study (low numbers, lack of homogeneity regarding symptoms in the phase of bladder emptying, pelvic surgery and detrusor hyperactivity, and lack of long term follow-up), all three rehabilitative approaches appeared to be effective in patients with OAB.

This clinical trial was performed in accordance with ethical standards on human experimentation and with the Helsinki Declaration of 1975.

## REFERENCES

[1] Abrams P., Cardozo L., Khoury S., Wein A., Incontinence: Fifth Edition, 2013, ICUD-EAU Paris

[2] Stecco L. & Stecco C., Fascial Manipulation for Internal Dysfunctions, 2014, Piccin Nuova Libreria: Padova.