Objectives

• This study was conducted to compare symptoms of patients with discontinuation of tamsulosin and continuation who had been diagnosed BPH and undergone combination therapy.
Materials and Methods

- This study included 108 men with BPH/LUTS who visited our urological clinics between April, 2008 and October, 2010.
  - All patients had not been given tamsulosin or dutasteride to treat BPH/LUTS before the study commenced.
  - All subjects were assessed by using IPSS.
  - Those patients with an IPSS of 8-19 and prostate volume ≥ 25 mL by TRUS were selected for the study.
- The efficacy of this regimen were assessed every 12 weeks after commencing two drugs administration.
- After 48 weeks, randomization was performed and patients had been given same combination drugs (Group 1) or only dutasteride 0.5 mg (Group 2).
- 69 patients completed our study Combination (n=36) / Discontinuation (n=33).
Results

• 69 of 108 patients completed our study
  – Group 1: 36 patients (52%)
  – Group 2: 33 patients (48%)
  – Mean age: 67.96±7.88 year
  – Mean prostatic volume: 40.45±12.81 mL
  – Mean prosate-specific antigen: 3.31 (0.4-9.9) ng/mL

• At 60 weeks, the results of questionnaire were as following
  – 61 patients mentioned that their symptoms were improved.

Figure 1. Patients satisfaction question on the treatment at week 60. The results of each group was not statistically significant by chi-square test (p=0.208).
Results

• IPSS
  – Baseline IPSS: 14.69 vs. 15.85 (p=0.322)
  – 48 week IPSS: 12.08 vs. 12.85 (p=0.582)
  – 72 week IPSS: 10.89 vs. 11.06 (p=0.897)
  – In Group 1 and 2, there were statistically significant differences in baseline and 72 week IPSS (Group 1: p<0.001, Group 2: p<0.001)

Conclusions

• In patients with moderate IPSS, there were not statistically significant differences between discontinuation group and combination group