Abstract

Background: Patients with lower urinary tract symptoms not only suffer from disturbance in urination, but also from disturbance of sleep, daily activities and interests caused by the symptoms. Previous studies have shown association between psychiatric morbidity and LUTS , but local study, particularly focused on those having Benign Prostatic Hyperplasia (BPH) is limited.

Aim: To identify the prevalence and of psychiatric disorders of a local population with LUTS due to BPH, and to evaluate the usefulness of the Hospital Anxiety and Depression Scale (HADS) and 12-item General Health Questionnaire (GHQ-12) as a potential screening tool for psychiatric disorders in patients with LUTS.

Methodology: A cross-sectional study was conducted from July 2012 to July 2013. All eligible Chinese patients diagnosed with LUTS due to BPH who attended the Day Service Unit at AHNH for pre-operational assessments of TURP were recruited. Data regarding the patient's background, past medical and psychiatric history, history of BPH, severity of symptoms was measured by IPSS and OABSS. Their subjective quality of life due to urinary problem were recorded as IPSS QoL Index. All subjects were interviewed with the

Chinese-Bilingual Structured Clinical Interview for DSM-IV Axis I Disorders, Patient research version by the author, to identify those suffering from psychiatric disorder. HADS and GHQ-12 were administered concurrently.

Results: One hundred subjects were recruited and all of them agreed to participate in the study after explanation of the author. The point prevalence of psychiatric disorders was 19%. The point prevalence of depressive and anxiety disorders were 14% and 7 % respectively. The most prevalent mood disorder was Major Depressive Disorder, while Adjustment Disorder with Anxiety was the most prevalent anxiety disorder. After logistic regression, the IPSS QoL Index and gainful employment were found to be the predictors of current psychiatric disorders. The GHQ-12 using 4 point Likert scoring method at cutoff threshold of 14 could provide satisfactory psychometric properties in detecting psychiatric morbidity. The result of HADS was inconclusive because of limited number of patients with anxiety.

Conclusion: Depression and anxiety disorders were common in local population of patients with LUTS compared with general elderly population. However, the prevalence rate was lower than that of western studies. Recognizing the predictors for psychiatric morbidity could assist clinicians to identify those with a predisposition to developing psychiatric complications and refer them for appropriate treatment. The GHQ-12 using 4-point Likert

method can be considered as a screening tool for psychiatric morbidity in patients with

LUTS.

Total number of words: 9622