

Overactive Bladder Syndrome: Recognizing Symptoms and Recommending Treatment Learning Assessment Questions

Objectives:

1. Recognize signs and symptoms that characterize OAB.
2. Compare and contrast therapy for OAB with respect to efficacy, safety and cost.
3. Describe contraindications and common adverse effects of OAB therapies.
4. Given a patient case, recommend appropriate treatment options.

1. Which of the following is characteristic of OAB?
 - A. Loss of urine following physical activity
 - B. Feeling of urgency, with or without loss of urine
 - C. Feeling of urgency, associated with infection
 - D. Increased frequency following caffeine intake
2. Which of the following is true regarding OAB?
 - A. The prevalence of OAB increases with age
 - B. The overall prevalence of OAB in the United States is approximately 70%
 - C. The loss of urine in a patient with OAB usually occurs with physical activity, such as sneezing or coughing
 - D. OAB can be cured by taking anti-cholinergic medications
3. A patient comes in to fill a prescription for oxybutynin patch. You are reviewing the patient's pharmacy profile and notice the medications below. Which of the following medications might indicate that a patient has a disease that is a contraindication to anticholinergic therapy?
 - A. Lisinopril
 - B. Loperamide
 - C. Lasix
 - D. Lumigan
4. Typically, anticholinergic therapy reduces the number of incontinence episodes per week by:
 - A. 10%
 - B. 30%
 - C. 70%
 - D. 95%
5. Which of the following best describes the mechanism of action for anti-OAB medications?
 - A. Increase excretion of sodium and water
 - B. Increase levels of serotonin and norepinephrine in the spinal cord, resulting in increased activity of the urethral sphincter
 - C. Decrease cholinergic activity at receptors on the detrusor muscle
 - D. Decrease adrenergic activity at central nervous system receptors

6. Which of the following is true about M₃ selective agents for OAB?
- A. They appear to cause less dry mouth than immediate release oxybutynin
 - B. They require multiple daily dosing for best effect
 - C. They do not require dose adjustment in the presence of hepatic disease
 - D. They are not metabolized by the cytochrome P450 enzyme system
7. A patient presents a prescription for an anti-OAB medication. Which of the following counseling points should be discussed with the patient?
- A. Expect to see a near-complete reduction in episodes of incontinence
 - B. Contact your health care provider if you experience severe abdominal pain or constipation for 3 or more days
 - C. Diarrhea and watery eyes are common adverse effects of these medications
 - D. If one anti-OAB agent doesn't work, it is likely that none of the agents will work to relieve your symptoms.
8. An 82 year old woman presents a prescription for tolterodine to the pharmacy. Which of the following is true regarding the use of anti-cholinergic agents in elderly patients?
- A. Elderly patients are at risk for under-treatment since they tend to be resistant to the effects of anti-cholinergic drugs
 - B. Elderly patients generally use fewer medications than younger patients, so drug-drug interactions are not usually a concern
 - C. Elderly patients should avoid the use of anti-OAB medications
 - D. Elderly patients may be at risk of cognitive adverse effects of anti-cholinergic agents and should be closely monitored
9. A patient has been recently diagnosed with OAB. Which of the following is true about OAB treatments?
- A. Behavioral therapy should only be used if pharmacologic treatments fail
 - B. Newer anticholinergic agents for OAB are significantly more effective than older agents
 - C. Common adverse effects of OAB treatments include dry mouth, constipation and dyspepsia
 - D. Anti-cholinergic agents for OAB should be used at reduced doses in patients with urinary retention, gastric retention or uncontrolled narrow angle glaucoma
10. A patient is purchasing incontinence pads for her elderly mother. Which of the following counseling points should be discussed with the patient?
- A. Incontinence products should not be used in OAB
 - B. Use of incontinence pads may cause skin breakdown, change the pad every 2-4 hours with continual loss of urine
 - C. If you notice any skin breakdown, apply triple antibiotic ointment to the area and leave it covered
 - D. Incontinence pads are usually one size fits all, both men and women