

The Effect of Phenazopyridine on Prolapse Surgery Voiding Trials

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I have no relevant financial relationships to disclose.

Background

- The mechanism of action of phenazopyridine is unknown, but it is an effective bladder analgesic
- Prior studies suggest a 20% drop in void trial (VT) failure rates after prolapse & continence surgeries ^{1,2,3}
- Subsequent RCT showed no difference in VT failure rates after midurethral slings ⁴

Objectives

- 1) To determine if phenazopyridine reduces the rate of short-term urinary retention after inpatient prolapse surgery.
- 2) To investigate the effect of phenazopyridine on postoperative pain and UTIs.

Study design

- Single-institution randomized non-blinded controlled trial
- Inclusion criteria:
 - Patients undergoing inpatient prolapse surgery
- Exclusion criteria:
 - Cystotomy preventing VT, pre-existing Foley or self-cath

Randomization

- Universal preoperative phenazopyridine 200 mg

Intervention

Phenazopyridine 200mg on POD1

vs

Control

No additional phenazopyridine

Methods

- Study assignment was blinded by using sequentially numbered sealed envelopes
- Demographics, pain scores, pain medication use, timing of dose(s), UTIs, & prolonged urinary retention were recorded

Primary outcome

- Standardized postoperative VT prior to discharge ⁶
 - Backfill 300 mL or capacity
 - Measure voided volume & PVR
 - Considered successful if the voided volume was greater than twice the PVR

Interim Conclusions

- Our RCT shows that phenazopyridine has no effect on short-term urinary retention following prolapse repairs.
- Phenazopyridine also has no effect on perioperative pain, narcotic usage, or postoperative UTIs.

References

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