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**Introduction & Objectives:** The actual problem of urology at the present days is the growth of infectious and inflammatory diseases of the genitourinary tract, resistant to etiotropic therapy, having a recurrent flow with the development of persistent dysuria. The incidence of cystitis is quite large (0.5-0.7 episodes per woman per year). This disease leads to serious social problems, a sharp decrease in the quality of life, including sexual life, affects mainly the able-bodied age, accompanied by severe pain syndrome, the development of neurosis-like conditions.

The literature reports an increase the number of patients with normal urinalysis and negative bacteriuria, but with persistent dysuric disorders.

**Materials & Methods:** The study included 30 patients, all of them female, with dysuric disorders aged 22 to 40 years with a mean duration of 2.6 ± 1.1 years, with complaints of persistent or recurrent dysuria and, in cystoscopy with biopsy, changes in the mucosa of the bladder as squamous cell metaplasia. All patients were divided into two groups. Patients of Group I (17; 57%) underwent transurethral electrocoagulation or transurethral laser coagulation of the area of squamous cell metaplasia of the bladder mucosa. All patients 3 weeks after the operation were weekly for 1 month, and then monthly for 5 months performed intravesical instillations of the solution of hyaluronic acid 40 mg / 50 ml. Patients of Group II (13;43%) only instillations of the hyaluronic acid solution were performed by the same procedure immediately after obtaining the result of the biopsy.

**Results:** The average number of urination before treatment in the first group was 12,05 ± 1,24, in the second group - 12,61 ± 1,66. The severity of the pain syndrome was 5,11 ± 0,99 in the first group, 4,9 ± 0,59 in the second group. In 100% of patients in both groups, squamous metaplasia of the bladder mucosa was detected with cystoscopy with biopsy and histological examination. A month after the last instillation, the results of the study were evaluated. Recurrence of cystitis was not detected in any patient. The degree of severity of dysuria in the 1st group was 2,76 ± 0,83 according to the visual analogue scale. The number of acts of urination decreased to 6,11 ± 0,78. According to the IQL questionnaire, 15 patients (88.2%) were satisfied with the results of the treatment. The degree of severity of dysuria in the second group was 4,2 ± 0,59 according to the visual analogue scale. The number of acts of urination decreased to 8,9 ± 1,08. According to the IQL questionnaire, 8 patients (61.5%) were satisfied with the results of the treatment. Five patients had discomfort in the lower abdomen.

**Conclusions:** The most significant decrease in the frequency of urination was found in patients of the 1st group (p = 0.93). There is no significant difference between groups in the severity of pain syndrome (p = 0.03). Further research is required.