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Urologic disorders linked to military service

Two studies have identified military service as a risk factor for certain urologic disorders in presentations made at the AUA annual meeting in Atlanta.

In the first study, researchers from the University of Alabama, Birmingham and Emory University, Atlanta found that prior military exposure is a risk factor for moderate/severe urinary incontinence among U.S. men, even after consideration of other known risk factors. The authors reviewed survey data from 5,297 men 20 years of age and older to establish the study population. The dataset was stratified into three age groups (< 55, 55-69 and >70 years of age), and a multivariable logistic regression model was reassessed for each population.

Results indicated that men with military exposure had a higher rate of any urinary incontinence (18.8% vs. 10.4%, $p < .001$) and moderate/severe incontinence (8.4% vs. 2.8%, $p < .001$) compared with men without prior military exposure. The stratified analyses indicated that for the youngest age group, the odds of moderate/severe incontinence with military exposure was 3.04 times (95% CI: 1.24, 7.48) the odds of incontinence without military exposure. Further, the stratified data showed no significant differences in the odds of incontinence based upon military exposure for the middle age group (1.05 [95% CI: 0.51, 2.18]) and the oldest group (0.86 [95% CI: 0.53, 1.39]), reported the authors, led by Alayne Markland, DO, MSc, of the University of Alabama.

A separate study from the University of California, San Francisco found that lower urinary tract symptoms are prevalent among Iraq and Afghanistan war veterans enrolled in Veteran Affairs health care who have received posttraumatic stress disorder (PTSD) diagnoses.

The retrospective study analyzed data from Iraq and Afghanistan veterans following the end of military service. The prevalence of PTSD and LUTS during the study period was 28.5% and 1.6%, respectively. Male veterans with PTSD compared with those without PTSD were more likely to suffer from LUTS (2.9% vs. 1.1%, $p < .001$). In an adjusted linear model, PTSD independently increased the relative risk of LUTS by nearly three times (2.81 [95% CI: 2.7-2.92]). After additional adjustment for medications used to treat PTSD and urology clinic visit history, the relative risk of LUTS decreased, but was still significantly associated with PTSD (1.19 [95% CI: 1.12-1.26]), reported the authors, led by Benjamin Breyer, MD.

"Both studies show a connection between military service and the development of urinary symptoms," said Christopher Amling, MD, of the Oregon Health Sciences University, Portland, who moderated an AUA press briefing during which these studies were discussed. "We hope that results will help us glean further insight into the potential long-term health effects associated with service in the armed forces, including how to prevent them."

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