UWIN (Urgency, Weak stream, Incomplete Void, Nocturia) Score for Assessment of Lower Urinary Tract Symptoms: Could it Replace the American Urology Association Symptom Index Score? An Open Label Randomized Cross over Trial

Abstract

Objective: The American Urology Association symptom index (AUASI) is the most accepted tool to assess lower urinary tract symptoms (LUTS). UWIN (urgency, weak stream, incomplete void, nocturia) score is a simplified questionnaire with fewer and more distinctive options omitting three questions from AUASI. We sought to identify if UWIN is equally efficient in capturing LUTS and could replace the gold-standard AUASI.

Methods: Consecutive consenting male patients with benign prostatic hyperplasia (BPH)-LUTS were randomized to receive either UWIN/AUASI questionnaire first followed by the other. Education levels, time taken to complete, need for assistance, ease of comprehension and satisfaction to symptom assessment were assessed for each questionnaire. Correlation analysis was done for corresponding items, total and QoL scores on both questionnaires.

Results: Total of 294 completely filled questionnaire pairs were analyzed. Between corresponding UWIN and AUASI items, there was 93-97% correlation. When obstructive and irritative scores were added, correlation was 85% and for QOL scores 89%. Overall, AUASI required more assistance (58 vs 34%, P < 0.001), took longer to complete (11.2 vs 4.8 min, P < 0.001) and required higher educational level for comprehension (P = 0.02). Significantly higher percentage of patients preferred the UWIN and more comprehensible.

Conclusion: UWIN is as effective in capturing LUTS as the gold-standard AUASI in spite of three questions of AUASI being omitted in UWIN. Severity of obstructive and irritative nature of LUTS and quality of life are interpreted similar to AUASI. UWIN is easier to comprehend and rapid, needing lesser assistance even with lower educational status.