



1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46  
47  
48  
49  
50  
51  
52  
53  
54  
55  
56  
57  
58  
59  
60  
61  
62  
63  
64  
65  
66  
67

**Re: Drossaerts J, Vrijens D, Leue C, Schilders I, Van Kerrebroeck P, Van Koeveringe G. Screening for Depression and Anxiety in Patients With Storage or Voiding Dysfunction: A Retrospective Cohort Study Predicting Outcome of Sacral Neuromodulation Treatment. *NeuroUrol Urodyn.* 2015**

This is a very interesting study focusing on the assessment of relationships between affective disorders and failure of Sacral Neuromodulation (SNM) in treating Overactive Bladder (OAB) or Non-obstructive Urinary Retention (NOR). Although retrospective, this study analyses the topic by means of validated questionnaires, robust criteria (e.g., excluding patients undergoing active treatment for psychiatric disorders at the time of study) and adequate statistics.

The authors found no significant relation between depression or anxiety and failure of SNM in their group of patients.

Despite other similar studies reported in the literature, concluding that psychological screening for personality traits or psychiatric status is not useful in predicting the success of SNM, we must also consider the heterogeneity of patients complaining of OAB or NOR: for example, if we focus on patients with Fibromyalgia (in which OAB is documented in percentages varying from 20% to 70%,<sup>1,2</sup>) psychological disorders undoubtedly appear (see new diagnostic criteria for Fibromyalgia recommended in 2010.<sup>3</sup>) As these patients may have several benefits from SNM,<sup>4</sup> in these particular cases preliminary assessment of psychological status could be useful for early identification of personality profiles of patients in whom SNM may fail.

In our experience, we find it useful to administer a psychometric test (e.g., MMPI) prior to deciding to subject a patient with Fibromyalgia to SNM for OAB.

Further studies applying psychological instruments to assess specific personality disorders associated with OAB or NOR are needed, to predict SNM outcomes in particular subgroups of patients with urinary and psychiatric disorders, such as Fibromyalgia.

Fabrizio Dal Moro\*

*Department of Surgical, Oncological and Gastroenterological Sciences University of Padova, Italy*

#### REFERENCES

1. Chung JH, Kim SA, Choi BY, et al. The association between overactive bladder and fibromyalgia syndrome: a community survey. *NeuroUrol Urodyn* 2013;32:66–9.
2. Smith HS, Harris R, Clauw Fibromyalgia D. An afferent processing disorder leading to a complex pain generalized syndrome *Pain Physician* 2011;14: E217–E245.
3. Wolfe F, Clauw DJ, Fitzcharles MA, et al. The American College of Rheumatology preliminary diagnostic criteria for fibromyalgia and measurement of symptom severity. *Arthritis Care Res* 2010;62:600–10.
4. Dal Moro F. Overactive bladder and fibromyalgia: The true story *NeuroUrol Urodyn* 2014;33:367.

Potential conflicts of interest: Christopher Chapple led the peer-review process as the Associate Editor responsible for the paper.

\*Correspondence to: Fabrizio Dal Moro, Department of Surgical, Oncological and Gastroenterological Sciences University of Padova, Italy.

E-mail: fabrizio.dalmoro@unipd.it

Received 10 August 2015; Accepted 10 August 2015

Published online in Wiley Online Library

(wileyonlinelibrary.com).

DOI 10.1002/nau.22870