

ASK THE DOCTOR



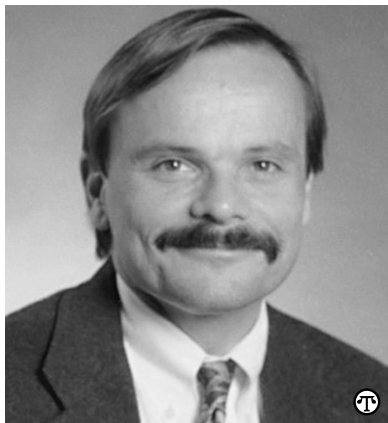
(NAPSA)—Q: Dear Dr. Dmochowski:

“I’ve suffered from overactive bladder (OAB) for many years and have tried various therapies... but I can’t seem to tolerate the bothersome side effects of these treatments, especially the dry mouth. I read recently that there are new treatments available. Can you recommend a treatment for me that will alleviate my symptoms without such harsh, drying side effects?”

A: Dear Reader:

First of all, I’d like to applaud you for having the courage to seek help for this condition, which affects more than 33 million Americans—many of whom choose to suffer in silence. You are not alone. Unfortunately, side effects, especially dry mouth, have long been a leading cause of treatment discontinuation among people suffering from OAB. And while OAB medications have been shown to be effective in treating OAB symptoms, many can produce these same drying side effects.

One option you may want to consider is Oxytrol® (oxybutynin transdermal system), the only transdermal therapy, or “patch,” available to treat OAB. In clinical trials, the patch demonstrated an improvement in OAB symptoms. This thin, flexible and clear patch allows the active medication (oxybutynin) to bypass the initial metabolism in a person’s liver and gastrointestinal tract, resulting in less conversion to the active metabolite, which is thought to be associated with drying side effects (e.g., dry mouth, constipation). Additionally, you only have to



apply the patch two times a week, which provides you with continuous all day and all night symptom relief for up to four days per patch.

It is important to remember that now more than ever—there are a wider variety of OAB medications to effectively treat this condition. Please speak with your health care professional to find the treatment that will work best for you.

The most common adverse events occurring with Oxytrol® were application site reactions, dry mouth (9.6 percent in study one, 4.1 percent in study two), constipation (3.3 percent in study two), diarrhea (3.2 percent in study one), dysuria (2.4 percent in study one) and abnormal vision (2.5 percent in study 2). To learn more and for the full prescribing information, talk to your doctor or visit www.OXYTROL.com.

Roger R. Dmochowski, M.D., is a Professor of Urology and Director of the Vanderbilt Continence Center at Vanderbilt University Medical Center in Nashville, Tennessee.