

QUESTION

Should measuring the postvoid residual vs. no assessment be used for all patients with Friedreich ataxia?

POPULATION: all patients with Friedreich ataxia

INTERVENTION: measuring the postvoid residual

COMPARISON: no assessment

MAIN OUTCOMES: Postvoid residual;

ASSESSMENT

Problem

Is the problem a priority?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<input type="radio"/> No <input type="radio"/> Probably no <input type="radio"/> Probably yes <input checked="" type="radio"/> Yes <input type="radio"/> Varies <input type="radio"/> Don't know	Elevated post-void residual was found in 39% of a small cohort (n=28) of people with FRDA (Musegante et al, 2013).	Clinical experience indicates individuals with FRDA may suffer with incomplete bladder emptying (and possibly urinary retention) leading to LUT symptoms.

Desirable Effects

How substantial are the desirable anticipated effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<input type="radio"/> Trivial <input type="radio"/> Small <input checked="" type="radio"/> Moderate <input type="radio"/> Large <input type="radio"/> Varies <input type="radio"/> Don't know	A search of four databases (CENTRAL, MEDLINE, EMBASE, CINAHL) identified no randomized, non-randomized controlled, cohort and case studies published from 2014 through to 13 July 2020. No further published evidence meeting the search criteria was identified in the Consensus Clinical Management Guidelines for Friedreich's ataxia, 2014.	

Undesirable Effects

How substantial are the undesirable anticipated effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS

<ul style="list-style-type: none"> ○ Large ○ Moderate ● Small ○ Trivial ○ Varies ○ Don't know 	<p>A search of four databases (CENTRAL, MEDLINE, EMBASE, CINAHL) identified no randomized, non-randomized controlled, cohort and case studies published from 2014 through to 13 July 2020. No further published evidence meeting the search criteria was identified in the Consensus Clinical Management Guidelines for Friedreich's ataxia, 2014.</p>	<p>Complications of catheterization or the use of suprapubic catheter.</p>
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Certainty of evidence

What is the overall certainty of the evidence of effects?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> ○ Very low ○ Low ○ Moderate ○ High ● No included studies 	<p>No published evidence.</p>	

Values

Is there important uncertainty about or variability in how much people value the main outcomes?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS						
<ul style="list-style-type: none"> ○ Important uncertainty or variability ○ Possibly important uncertainty or variability ● Probably no important uncertainty or variability ○ No important uncertainty or variability 	<table border="1" data-bbox="518 1138 1419 1295"> <thead> <tr> <th data-bbox="518 1138 930 1222">Outcomes</th> <th data-bbox="936 1138 1110 1222">Importance</th> <th data-bbox="1117 1138 1419 1222">Certainty of the evidence (GRADE)</th> </tr> </thead> <tbody> <tr> <td data-bbox="518 1227 930 1295">Postvoid residual - not measured</td> <td data-bbox="936 1227 1110 1295">IMPORTANT^a</td> <td data-bbox="1117 1227 1419 1295">-</td> </tr> </tbody> </table> <p data-bbox="562 1333 1199 1360">a. Identified as important by expert authors on this topic</p>	Outcomes	Importance	Certainty of the evidence (GRADE)	Postvoid residual - not measured	IMPORTANT ^a	-	
Outcomes	Importance	Certainty of the evidence (GRADE)						
Postvoid residual - not measured	IMPORTANT ^a	-						

Balance of effects

Does the balance between desirable and undesirable effects favor the intervention or the comparison?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> ○ Favors the comparison ○ Probably favors the comparison ○ Does not favor either the intervention or the comparison ● Probably favors the intervention ○ Favors the intervention ○ Varies ○ Don't know 	No published evidence.	

Acceptability

Is the intervention acceptable to key stakeholders?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
<ul style="list-style-type: none"> ○ No ○ Probably no ● Probably yes ○ Yes ○ Varies ○ Don't know 	No published evidence.	

SUMMARY OF JUDGEMENTS

PROBLEM	JUDGEMENT						
	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the	Probably favors the intervention	Favors the intervention	Varies	Don't know

JUDGEMENT							
			comparison				
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

TYPE OF RECOMMENDATION

Strong recommendation against the intervention ○	Conditional recommendation against the intervention ○	Conditional recommendation for either the intervention or the comparison ○	Conditional recommendation for the intervention ●	Strong recommendation for the intervention ○
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CONCLUSIONS

Recommendation

We conditionally recommend that individuals with Friedreich ataxia reporting LUT symptoms have their post-void residual bladder volume measured.

Justification

Clinical experience indicates that LUT symptoms can significantly impact on quality of life. An elevated post-void residual (PVR) can exacerbate storage symptoms and also predispose to urinary tract infections. A PVR should be measured before commencing a trial of an antimuscarinic agent.

Subgroup considerations

This recommendation is for individuals with Friedreich ataxia and LUT symptoms.

Research priorities

Examination of any correlations between LUT symptoms, post-void residual volume and treatment outcomes.

References

Musegante A, Almeda P, Monteiro R, Bassoro U. Urinary symptoms and urodynamics findings in patients with Friedreich's ataxia. *International Brazilian Journal of Urology*. 2013;39(6):867-74.