

Intravesical chondroitin sulfate of little benefit in cystitis

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Intravesical sodium chondroitin sulfate is not recommended for the treatment of interstitial cystitis/bladder pain syndrome in women as it produces only minor improvements in symptoms and pain, according to research published in the June issue of *Urology*.

(HealthDay) -- Intravesical sodium chondroitin sulfate is not recommended for the treatment of interstitial cystitis/bladder pain syndrome (IC/BPS) in women as it produces only minor improvements in symptoms and pain, according to research published in the June issue of *Urology*.

J. Curtis Nickel, M.D., of Queen's University in Kingston, Canada, and colleagues conducted a multicenter, randomized, double-blind, parallel-group study involving 98 women with IC/BPS. The women were treated with either eight weekly bladder instillations of 20 mL of 2-percent chondroitin sulfate or 20 mL of inactive control solution.

Eighty-three percent of the women completed the study. The researchers found that, after 11 weeks, 38 percent reported moderate or marked improvement with chondroitin sulfate, compared with 31.3 percent of control patients. Chondroitin-treated patients also exhibited better response using Interstitial Cystitis Symptom Index and visual analog scale pain scores, although the changes were not statistically significant.

"The results from the present small, controlled, [randomized clinical trial](#) suggest that intravesical [chondroitin](#) sulfate therapy for IC/BPS can result in minor improvements in IC/BPS-related symptoms and pain," the authors write. "However, the magnitude of benefit observed in our small [pilot study](#) does not support its use as a monotherapy for this condition."

The study was supported by Watson Pharmaceuticals Inc.

More information: [Abstract](#)
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