



REPLY TO THE AUTHORS: Re: One-day voiding diary in the evaluation of Lower Urinary Tract Symptoms in children

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To the editor,

We are thankful for the comments and agree with the delicate considerations (1).

Repeated measures of clinical parameters increase accuracy, identify possible variations, and minimize measurement bias. Our study demonstrates, despite possible biases, that there is a good correlation between the two formats (2).

The 3-day voiding diary is the “Gold standard” in assessing LUTS in children. Difficulties in obtaining adequate assessments, especially in more complex cases and families with low literacy, have motivated other authors and our group to search for simplified alternatives.

Our proposal would minimize patient/caregiver burden and increase the rate of complete responses.

Other authors have studied these aspects previously. Elmer et al. evaluated incontinent women and showed promising results with this approach (3). In the same direction, Veiga et al. demonstrated a good correlation between the two formats and considered that a 2-day bladder diary was sufficient to evaluate bladder capacity and fluid intake (4).

Our findings reinforce this idea that a simplified version could be an attractive alternative.

Furthermore, we plan to evaluate asymptomatic and non-neurotypical children. The difficulties in investigating asymptomatic children (ethical aspects and little cooperation from parents) are important limiting factors.

Further studies are needed to validate the one-day voiding diary in evaluating LUTS and clarify the accurate correlation between objective bladder parameters (Maximum Voided Volume) and estimated bladder capacity (EBC) in the asymptomatic and children with LUTS.

The authors.

CONFLICT OF INTEREST

None declared.

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