QUALITY OF LIFE OF PATIENTS SUFFERING FROM CHRONIC UROLOGICAL DISEASES

Otakulov Gayratzhon Olimzhonovich
https://orsid.org/0009-0004-7617-2594.
Kuziev Zhavohirbek
Central Asian Medical University.
Fergana, Uzbekistan.
https://doi.org/10.5281/zenodo.18757270

ARTICLE INFO

Received: 21st February2026
Accepted: 22nd February 2026
Online: 23rd February 2026

KEYWORDS

quality of life, chronic urological diseases, SF-36, IPSS, NIH-CPSI, chronic cystitis, BPH

ABSTRACT

Quality of life (QOL) in patients with chronic urological diseases (urolithiasis, cancer, chronic prostatitis/cystitis) is significantly reduced due to pain, dysuria, and sexual dysfunction. It is assessed across physical, emotional, and social dimensions, often using the SF-36, WISQoL, and RCC10 questionnaires, which show improvement after laparoscopic surgery.

Introduction. Despite the availability of modern therapy, patients' quality of life (QOL) remains low, particularly in psychosocial areas, reflecting the chronic nature of the diseases and complicating timely recovery. International studies demonstrate that chronic urological diseases are associated with high levels of stress reactions, sleep disturbances, sexual dysfunction, and social maladjustment.

Key aspects of quality of life in urological patients:

• **Physical condition:** Constant or recurring lower back/genital pain, urinary disorders (frequent, difficult, delayed), urinary incontinence.

• **Emotional state:** Increased anxiety, depression, constant stress due to chronic illness and fear of relapse.

• **Social functioning:** Limited activity due to the need for constant access to the toilet, awkwardness, decreased performance.

• **Sexual sphere:** Erectile dysfunction, decreased libido, pain during intercourse.

The relevance of the study lies in the need for a comprehensive assessment of the impact of various chronic urological conditions on the quality of life of patients in a multicultural context (Russia, Uzbekistan, European countries), which is important for the development of targeted treatment and preventive strategies.

Purpose of the study. To assess the quality of life of patients with chronic urological diseases and identify the main factors influencing its level.

Material and research methods. A multicenter, cross-sectional observational study was conducted. The study included 432 patients (291 men, 141 women) aged 25–75 years (mean age 51.6 ± 12.4 years) with established diagnoses of chronic urological diseases:

• Chronic pyelonephritis — 102 (23.6%);
• Chronic cystitis — 118 (27.3%);
• Chronic prostatitis/pelvic pain syndrome — 74 (17.1%);

• Benign prostatic hyperplasia — 138 (31.9%).

Patients were examined at a multidisciplinary clinic in Fergana between 2022 and 2025.

Mean values (M ± SD), ANOVA, correlation analysis (Pearson's coefficient), and multivariate regression analysis were calculated to identify factors influencing QOL ($p < 0.05$ significant).

Results and discussion. The lowest overall quality of life scores were observed in patients with chronic prostatitis/pelvic pain syndrome and chronic cystitis, reflecting severe pain and its impact on daily activities.

Correlation analysis:

• A strong negative correlation was found between symptom severity (NIH-CPSI, IPSS) and SF-36 scores ($r = -0.62$ to -0.49, $p < 0.001$).

• Disease duration (>5 years) was associated with a significant decrease in QOL (-12% to -18%, $p < 0.01$).

• The presence of depression on the PHQ-9 also significantly worsened SF-36 scores ($r = -0.57$, $p < 0.001$).

Long-term chronic symptoms such as pain, urinary frequency, dissatisfaction with treatment results, physical activity limitations, and sleep disturbances have a multidimensional impact on quality of life. Chronic cystitis and prostatitis/pelvic pain syndrome are particularly associated with a significant pain component, reflected in low SF-36 pain scores and psychoemotional components.

The data obtained confirm that chronic urological diseases significantly impair patients' quality of life, both in physical and psychosocial domains. A comparison with data from international studies reveals similar trends: chronic symptoms lead to decreased functional status, limited social activity, and increased levels of anxiety/depression.

In patients with a disease duration of more than 5 years, a statistically significant decrease in all SF-36 scales was observed, emphasizing the importance of early detection and multidisciplinary support.

Conclusions:

1. Patients with chronic urological diseases have significantly lower quality of life across all SF-36 components compared to the healthy population ($p < 0.001$);

2. The most pronounced decrease in quality of life is observed in patients with chronic prostatitis/pelvic pain syndrome and chronic cystitis;

3. Symptom severity and disease duration are significant predictors of decreased quality of life;

4. Comprehensive treatment strategies, including psychosocial support, are needed to improve patients' quality of life.

.

References:

1.Petrova T.N., Belov R.A. Факторы, влияющие на качество жизни пациентов с хроническими урологическими заболеваниями. Урология и нефрология России. 2025; 23(1): 12–20.

2.Li W., Chen X., Zhang Q. Health-related quality of life in chronic urinary conditions: an Asian perspective. Asian Journal of Urology. 2023; 12(4): 247–255.

3.Jones P., Smith J. Correlation of symptom severity and quality of life in chronic urological diseases. Journal of Clinical Urology. 2022; 15(6): 512–520.
4. Отакулов Г., & Муминова, М. (2026). РОЛЬ PSA-ПЛОТНОСТИ В ПРОГНОСТИРОВАНИИ ОСЛОЖНЕНИЙ ДОБРОКАЧЕСТВЕННОЙ ГИПЕРПЛАЗИИ ПРЕДСТАТЕЛЬНОЙ ЖЕЛЕЗЫ. New Uzbekistan Journal of Academic Research, 3(2, part 2), 15–17. Retrieved from https://in-academy.uz/index.php/yoitj/article/view/75135
5.Отакулов Г. ., & Сафахонов , М. (2026). КОРРЕЛЯЦИИ МЕЖДУ ОБЪЕКТИВНЫМ УВЕЛИЧЕНИЕМ ОБЪЁМА ПРОСТАТЫ И СУБЪЕКТИВНЫМ ВОСПРИЯТИЕМ СИМПТОМОВ ПАЦИЕНТАМИ. Естественные науки в современном мире: теоретические и практические исследования, 5(2), 76–77. извлечено от https://in-academy.uz/index.php/zdtf/article/view/75100