LETTER TO EDITOR

Letter to the Editor - Re: Blaivas JG, Tsui JF, Mekel G, Benedon MS, Li B, Friedman FM, Weinberger JM, Weedon J, Weiss JP. Validation of the lower urinary tract symptom score. *Can J Urol* 2015;22(5):7952-7958.

BLAIVAS JG, WEISS JP. Letter to the Editor - Re: Blaivas JG, Tsui JF, Mekel G, Benedon MS, Li B, Friedman FM, Weinberger JM, Weedon J, Weiss JP. Validation of the lower urinary tract symptom score. *Can J Urol* 2018;25(1): 9152-9153.

There has been considerable interest in the Lower Urinary Tract Symptom Score[©] (LUTSS) which was validated in the study cited above. To our knowledge, it is the only questionnaire validated for both men and women that encompasses almost all lower urinary tract symptoms and provides a granular grading system for urinary urgency.

At the time of publication, the actual questionnaire was inadvertently not included, so it is has not been available in the public domain. The LUTSS[©] is depicted on the following page in its entirety.

Respectfully,

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Letter to Editor

Table 1. The lower urinary tract symptom score (LUTSS) questionnaire.

1. How many times do you usually urinate during		7. How often o
the day? a.	8 or less times	related to changing
b.	9 - 10 times	a
с.	11 – 12 times	b
d.	13 - 14 times	с.
e.	15 or more times	d
5.		e
2. How many t	mes do you usually urinate at night	
(from the time you go to bed until the time you		8. How often
wake up f	or the day)?	clothes w
a.	0 – 1 time	it happen
b.	2 times	a
с.	3 times	b
d.	4 times	c.
e.	5 or more times	d
		e
3. What is the	reason that you usually urinate?	
a.	Out of convenience (no urge or	9. In your opir
	desire)	a
b.	Because I have a mild urge or desire	b
	(but can delay urination for over an	C.
	hour if I have to)	d
с.	Because I have a moderate urge or	e
	desire (but can delay urination for	
	more than 10 but less than 60	10. How often
L.	minutes if I have to)	emptying finish uriı
d.	Because I have a severe urge or	
	desire (but can delay urination for less than 10 minutes)	a. b
e.	Because I have desperate urge or	c.
e.	desire (must stop what I am doing	d
	and go immediately)	e
4. Once you get the urge or desire to urinate, how		11. How often
long can y	ou usually postpone it comfortably?	urination
a.	More than 60 minutes	a
b.	About 30 – 60 minutes	b
с.	About 10 – 30 minutes	C.
d.	A few minutes (less than 10	d
e.	minutes)	e
	Must go immediately	12. How often
L New often de very get e sudden were en desire te		a
5. How often do you get a sudden urge or desire to		b
urinate that makes you want to stop what you are doing and rush to the bathroom?		C.
•		d
a.	Never Rarely	e
b.		12 How often
c. d.	A few times a month A few times a week	13. How often urination
e.	At least once a day	a
с.	At least once a day	b
6 How often d	o you get a sudden urge or desire to	c.
	urinate that makes you want to stop what you	
are doing and rush to the bathroom but you		d e
-	here in time (i.e. you leak urine or	c
wet pads)		14. How both
a.	Never	symptom
b.	Rarely	a
υ.		
c.	A few times a month	b
	A few times a month A few times a week	b c.
c.		
c. d.	A few times a week	C.

7. How often do you experience urine leakage related to physical activity (lifting, bending, and changing positions, coughing or sneezing)?

- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

8. How often do you wet yourself, your pads or your clothes without any awareness of how or when it happened?

- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

9. In your opinion how good is your bladder control?

- a. Perfect control
- b. Very good
- c. Good
- d. Poor
- e. No control at all

10. How often do you have a sensation of not emptying your bladder completely after you finish urinating?

- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

1. How often do you stop and start during

- on?
- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

2. How often do you have a weak urinary stream?

- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

13. How often do you push or strain to begin urination?

- a. Never
- b. Rarely
- c. A few times a month
- d. A few times a week
- e. At least once a day

4. How bothered are you by your bladder

- otoms? a. Not at all
 - a. Not at all b. A little bit
 - c. Somewhat bothersome
 - d. A lot
 - e. I find it intolerable