Not all dysautonomias are created equal

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We read with interest the article by St. Aubin and colleagues about urinary dysfunction in patients with dysautonomia [1]. Out of an impressive sample of 815 patients evaluated during a 10-year period, 82 were studied with bladder ultrasound and videourodynamic studies.

Unfortunately, rather than disclosing the specific diagnosis of these patients, the authors used the umbrella term “dysautonomia” in all of them. This missing information is important because the degree of autonomic dysfunction (including bladder dysfunction) in different disorders varies notably. Patients with multiple system atrophy or autoimmune autonomic ganglionopathy can have incomplete bladder emptying requiring self-catheterization [2]. This is infrequent in other disorders such as pure autonomic failure [3]. In conditions in which the degree of autonomic dysfunction is unclear (e.g., postural tachycardia syndrome), patients may have urinary complaints [4] with normal urodynamic tests [5]. Also, patients with Parkinson disease or multiple sclerosis were excluded from St. Aubin’s paper in spite of the fact that urinary problems in these disorders are frequently due to autonomic dysfunction [6, 7].

Compliance with ethical standards

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