Hypothesis / aims of study
The purpose of the study is to estimate the trends in terms of hospitalization rates for lower urinary tract symptoms/benign prostatic hyperplasia (LUTS/BPH) in real-life clinical practice, using information from administrative databases of the Spanish health care system.

Study design, materials and methods
Out of a total of 1,287,102 men over 40 years old from Valencian community territory (Eastern Mediterranean coast of Spain) were examined. The registered prevalence in 2014 of LUTS/BPH was 9.06% (116,553 men). Hospitalization rates for reasons related to LUTS/BPH were evaluated for 6 consecutive years, from 2009 to 2014. BPH-related hospitalization was considered when the hospital records included primary diagnosis and/or procedures related to BPH.

Results
Hospitalization rate for BPH/LUTS-related reasons increased during the study period from 9,358 in 2009 to 14,966 in 2014 (an increase of 80%). We also have registered 10 DRG (Diagnostic-Related Group) most often associated at discharge. Surgical BPH discharges in this period had a more modest increase (57%). TURp remains as the first surgical procedure, with a peak incidence in the age range of 70 to 74 years old.

Interpretation of results
Hospitalization related BPH/LUTS diagnosis continues to rise but not so high related by surgery of BPH as related by associated comorbidity

Concluding message
The present analysis provides real-life temporal trends of hospitalization rates for reasons related to LUTS/BPH in a large Spanish cohort of men. The DRG more often associated to BPH/LUTS discharge was non-surgical (pneumonia). TURp remains as the first surgical BPH procedure

Disclosures
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