

MEDICAL MANAGEMENT OF LOWER URINARY TRACT SYMPTOMS RELATED TO BENIGN PROSTATIC HYPERPLASIA: TEMPORAL TRENDS OF PRESCRIPTION OVER 6 YEARS IN A LARGE SPANISH MEN POPULATION

Hypothesis / aims of study

The purpose of the study is to estimate the trends in drug prescriptions 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). Prescription data were calculated for 6 consecutive years, from 2009 to 2014, coinciding with the Spanish program referral criteria between primary and specialized care for LUTS/HBP and the progressive introduction of electronic medical records. Annual use prevalence rate for each drug class were calculated for the entire study period.

Results

Registered prescription drugs for LUTS / BPH increased during the study period going from 8.219 to 35.571 men treated pharmacologically. This increase was collected by drug classes, recording the percentage year by year and especially for the most prescribed, alpha blockers (44,81% in 2014), the number of prescriptions for each drug

Interpretation of results

The increase in the pharmacology treatment of BPH during the study period has been especially combination therapy. It draws attention to the slight increasing prescription of phytotherapy in these years in spite of not being a treatment with clear scientific evidence (10.72 % to 14,74%).

Concluding message

The present analysis provides the real-life prescription trends of drugs used to treat BPH/LUTS in a Spanish cohort of men. The prevalence of the use of drugs prescribed for LUTS/BPH has steadily increased. Alpha-blocker monotherapy is the most prescribed class of drugs but the most striking percentage increase is for the combination treatment.

Keywords: Benign prostatic hyperplasia (BPH) , Pharmacology, Male, Retrospective study

Disclosures

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