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518

Abstract Reproduction Form B-1

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LETTERS)DEMOGRAPHICS AND DISTRIBUTION OF DISEASE AMONG
WOMEN SEEKING CARE FOR INCONTINENCE AND PROLAPSE;
CURRENT OBSERVATIONS AND FUTURE PROJECTIONS**DEMOGRAPHICS AND DISTRIBUTION OF DISEASE AMONG WOMEN SEEKING CARE FOR INCONTINENCE AND PROLAPSE; CURRENT OBSERVATIONS AND FUTURE PROJECTIONS.**K. Luber, J.Y. Choe, Sally Boero.

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OBJECTIVE: We sought to better understand the characteristics of women seeking care for pelvic floor disorders and to create projections for future demand for care of these conditions. **Methods:** The study took place as a retrospective review within a large, stable HMO population with an established continence program to which all referrals for continence and prolapse care are directed. Patients underwent complete urogynecologic evaluation including cystometry. Women seeking care were compared with regard to age, distribution of conditions (GSI, POP, Urge symptoms/negative CMG and DI) and probability of undergoing surgery. A baseline value for women in each age range was available which allowed calculations of the number of consults generated per 1000 women in each age group per year. Predictions of future demand were created by modeling the study population utilizing US Census Bureau data projecting population changes over the next 30 years. Students t-test and chi squared were used as tests of statistical significance where appropriate. **Results:** 2003 consecutive patients were analyzed. Data was available on all patients. Patient ages demonstrated a normal distribution around a median age of 61.5 years with a range of 26 to 91 years. GSI was the most common diagnosis among younger women (90 % for 30-39 years vs. 46 % for 80-89 years, $p < 0.05$). Both pelvic organ prolapse (POP) and Urge symptoms / negative CMG along with DI were more common among older patients (Urge conditions 55% for 30-39 years vs. 85% for 80-89 / POP 15% for 30-39 vs. 31 % for 80-89.) Younger women were more likely to undergo surgery with a rate of 48% for 30-39 years versus 29 % for 70-79 years ($p < 0.05$). The highest proportionate demand for consultation was found among the population aged 70-79 years (10.1 consults per 1000 women per year). The largest projected growth in need for services will take place in the population aged 55 and older with very limited change in demand among the population 55 and younger. **Conclusion:** These data demonstrate that age plays a major role in the distribution of conditions, probability of surgery and demand for consultation. Over the next 30 years the major increase in demand for services will occur within the age ranges affected by more complex and often combined conditions. As well as allowing us a better understanding of women currently seeking care for these disorders, these projections have implications for the training of physicians and the development of programs to care for this population in the future.