

SUCCESSFULLY TREATED OVERACTIVE BLADDER SUFFERERS CONSUME FEWER HEALTHCARE RESOURCES

Hypothesis / aims of study

Overactive bladder (OAB) is a costly chronic health condition affecting women and men of all ages. The present study aimed to assess the relationship between patient perception on OAB therapy success and resource use associated with treatment. The study was based on the hypothesis that OAB sufferers who consider their condition to be successfully treated consume fewer resources than OAB sufferers who consider their condition to be unsuccessfully treated.

Study design, materials and methods

The study population consisted of respondents from the 2003 US National Health and Wellness Survey (NHWS). The NHWS is an annual survey of a nationally representative sample of the adult US population that contains a broad range of health-related topics. The survey was fielded through the internet in June 2003, and obtained responses from a total of 36,452 adults, of whom 2,602 reported having OAB diagnosed by a physician.

A descriptive, cross-sectional, follow-up survey of a stratified sample of the OAB sufferers from the NHWS was conducted via the internet in January 2004. The stratified sample was designed to contain a cohort of 200 individuals diagnosed with, and using prescription drug therapy for OAB, and 200 individuals diagnosed with, but not using prescription drug therapy for OAB.

The survey was designed to identify OAB symptom burden, healthcare resource use in the past 6 months, use of specific therapies, and opinions regarding therapy. OAB symptoms included a sudden, overwhelming urge to urinate; frequent urge to urinate; urinating more than 8 times per day; or involuntary loss of urine (leakage). Resource use in the past 6 months was defined by: type and number of physician visits, diagnostic tests, use of incontinence pads, frequency of urinary tract infections, skin infections and falls (with and without fractures), and monthly out-of-pocket expenses associated with OAB. Successful versus unsuccessful treatment for OAB was elicited via a single question.

Comparisons were made on each of the healthcare resource items for those who reported that they were successfully treated and those who reported that they were not successfully treated. Statistical significance at the $\alpha = 0.05$ level was evaluated using Chi-Square for categorical data and t-tests for continuous data.

Results

A total of 441 adults responded to the follow-up survey, of whom 196 (44%) were in the OAB cohort with prescription drugs, and 245 (56%) were in the cohort without prescription drugs. Respondents were aged a mean 61.4 years and predominantly female (76.4%); 14.7% of respondents indicated that they were employed full-time. The second most commonly used OAB therapy, after prescription drug therapy, was Kegel exercises (29.3%), followed by behavioral therapy (7%).

Forty eight percent of respondents (n=210) considered their OAB to be successfully treated with their current regimen. Most OAB sufferers said that while they experienced fewer symptoms as a result of their treatment regimen, they still thought that their situation could be improved. Comparative results of resource use between successfully and unsuccessfully treated OAB sufferers are presented in Table 1.

Table 1. Resource use of successfully and unsuccessfully treated OAB sufferers

Variable	Successfully treated (n=210)	Unsuccessfully treated (n=231)	p-value
Percentage of respondents with at least one visit to a primary care physician	53.3%	63.3%	0.03*
Mean number of primary care physician visits per person	0.8	1.2	<0.01**
Percentage of respondents with at least one diagnostic test	11.4%	12.1%	0.82
Percentage of respondents using incontinence pads	39.2%	64.1%	<0.01*
Mean number of urinary tract infections per person	0.3	0.7	0.01**
Mean number of skin infections per person	0.3	0.6	0.03**
Mean number of falls (with and without fractures) per person	0.8	1.5	0.02**
Percentage of respondents using OAB prescription medication	57.6%	32.5%	<0.01*
Mean monthly OAB-related out-of-pocket expenses per person	\$41.98	\$86.91	0.21

*Chi-square

**t-test

Interpretation of results

The results from this study indicate an unmet need among individuals suffering from OAB. Fifty two percent of respondents (n=231) did not consider their OAB to be successfully treated despite current OAB therapy. For each variable examined except prescription medication, respondents who considered their OAB condition to be successfully treated with current therapy tended to consume fewer resources than respondents who considered their OAB to be unsuccessfully treated. Overall, therefore, it appears that higher use of appropriate OAB medication is associated with a successful treatment outcome and significantly lower use of other healthcare resources.

Concluding message

Unsuccessfully treated OAB is associated with increased resource use and thus implies significant economic repercussions for health care providers and sufferers. New therapies that can improve the proportion of sufferers who are successfully treated would be a welcome addition to the current treatment armamentarium.

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