Baseline Characteristics of Patients With Overactive Bladder Receiving Navigated or Routine Care Identified From a US National Retrospective Database Study

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OBJECTIVE

To describe real-world demographics and geographic characteristics of patients with overactive bladder (OAB) who received navigated care compared with those who did not receive navigated care

CONCLUSIONS

Among patients with OAB in this analysis, the vast majority (>80%) were not assigned a nurse navigator and, of those who were, rates were highest among women identified in the database as Black, Asian, or White

Patients with OAB on Medicaid or Medicare were also more likely to receive navigated care versus those with other insurance types; rates of navigated care were highest in Philadelphia and Chicago Medicare regions

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INTRODUCTION

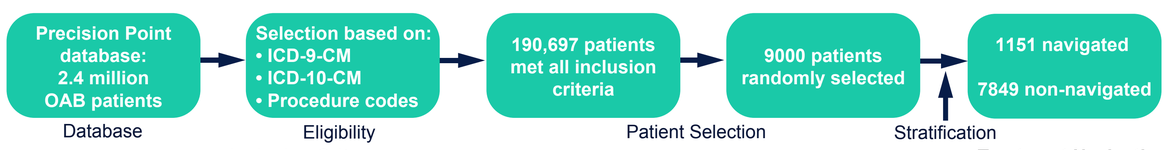
Background

- Overactive bladder (OAB) is a highly prevalent condition, affecting as many as 30% of men and 40% of women in the United States[1]
- Although effective interventions are available, OAB often remains undertreated
  - First-line behavioral interventions and second-line oral medications are insufficient and may be intolerable for many patients, and persistence with oral medication is low[2,3]
  - However, fewer than 5% of patients with OAB overall and 10% of those treated by urology providers progress to third-line treatment with onabotulinumtoxinA injection, percutaneous tibial nerve stimulation, or sacral nerve stimulation[4]
- Navigation of care by a dedicated professional can help guide patients through the OAB clinical pathway
- Navigator care can also lead to increased advancement and adherence to third-line treatment options[5]
- Limited information exists regarding real-world demographics of OAB patients and treatment, including access to navigation of care

METHODS

- A random set of patients with OAB were retrospectively identified using ICD-9-CM, ICD-10-CM, and procedure codes from the Precision Point Specialty Analytics Portal for OAB database, which contains electronic medical record data for more than 90 community-based urology practices in the United States that provide care to over 2.4 million patients with OAB

Study Cohort Selection



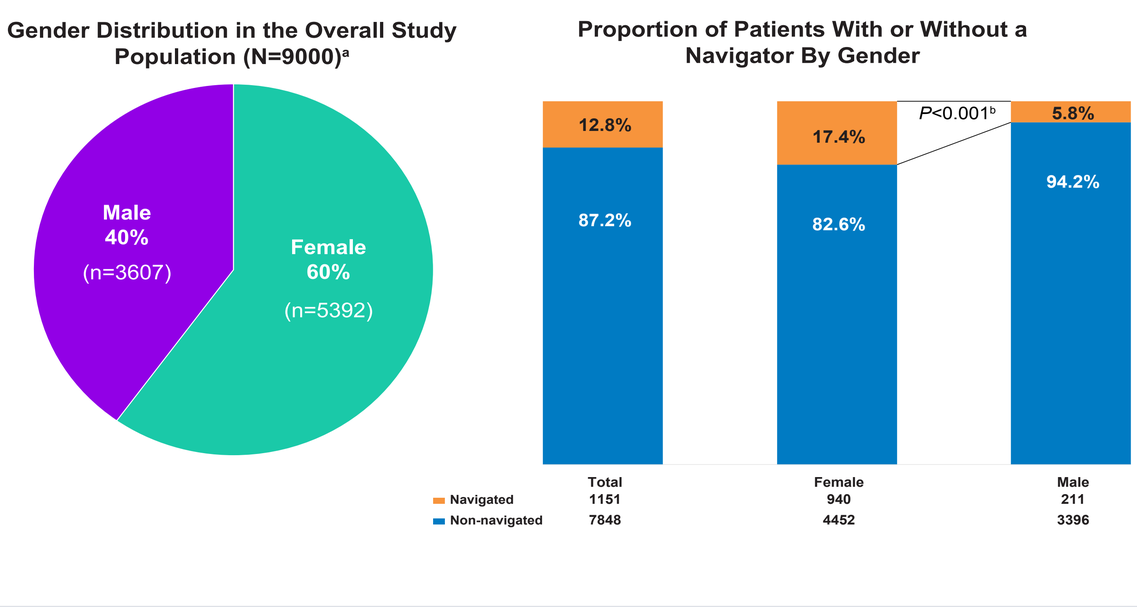
Inclusion Criteria
- Adults aged ≥18 years
- Newly diagnosed and treated for non-neurogenic OAB between January 1, 2015 and December 31, 2019

Treatment Navigation
- Practice offered navigated care
- Patients had been assigned to a navigator list
- Navigator initiated care management through notes or action items in the patient's chart

ICD-9-CM, International Classification of Diseases, 9th revision, Clinical Modification; ICD-10-CM, International Classification of Diseases, 10th revision, Clinical Modification; OAB, overactive bladder.

RESULTS

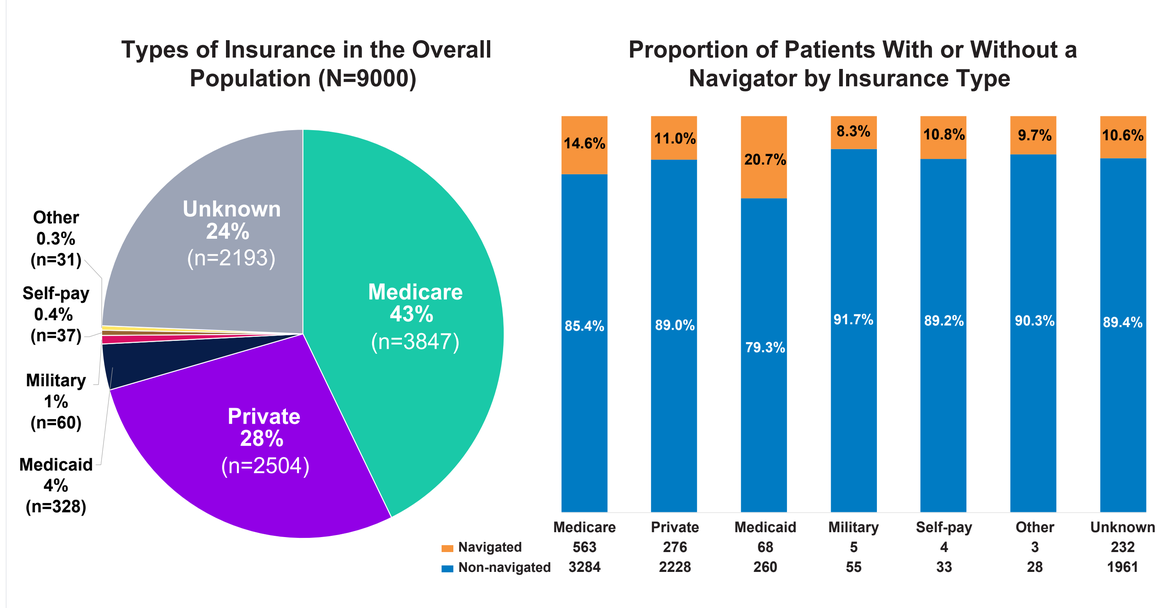
Patient Demographics: Gender



[a]Study sample included 1 patient with unknown gender.
[b]Navigated patients vs non-navigated patients, based on a two-sided Pearson's chi-square test.

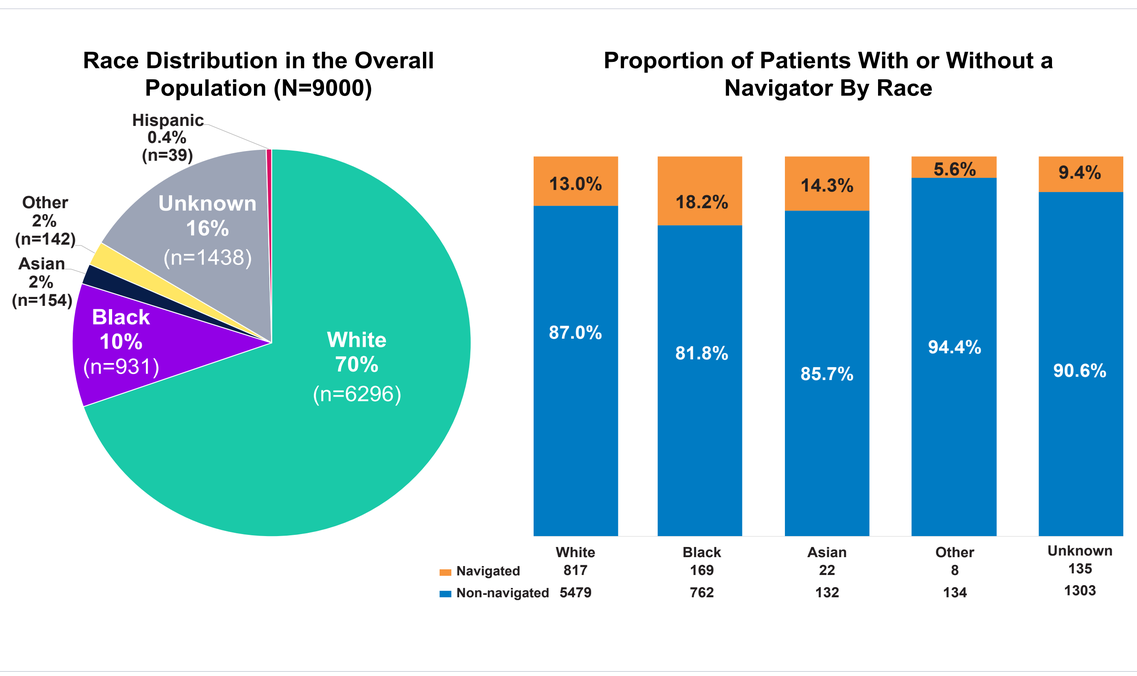
- A greater proportion of women than men received navigated care (17.4% of women vs 5.8% of men, *P*<0.001)

Patient Demographics: Insurance Type



- The highest proportions of patients receiving navigated care were those on Medicaid and Medicare

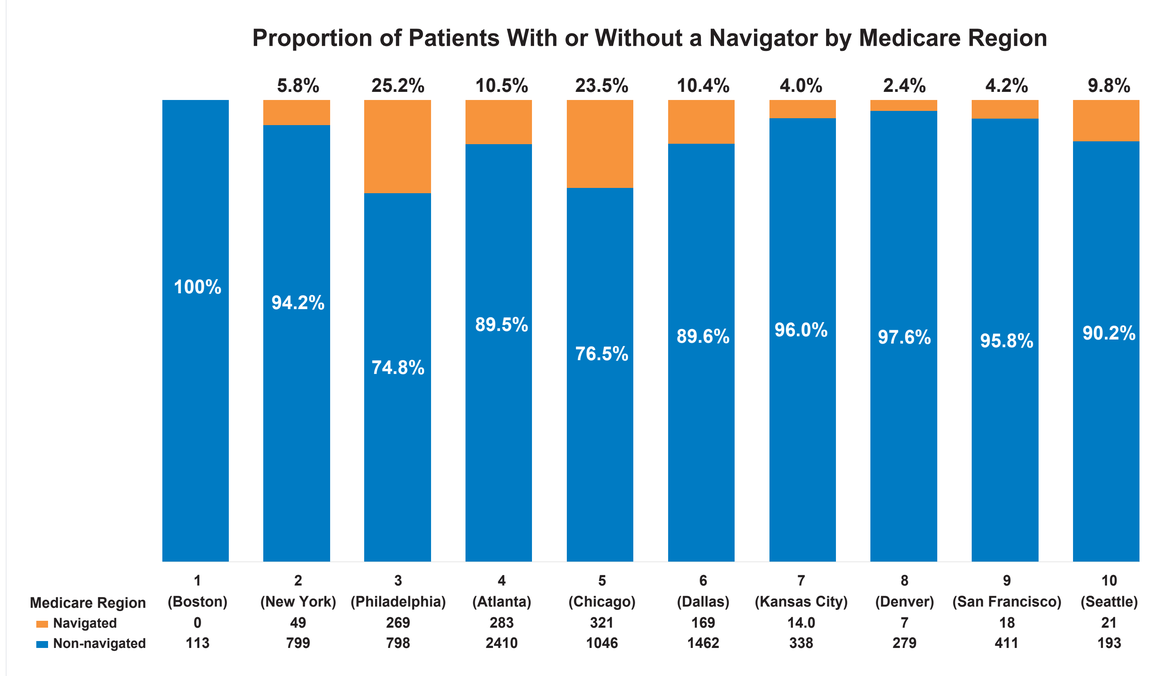
Patient Demographics: Race[a]



[a]Racial group names consistent with database entries.

- The highest proportion of patients receiving navigated care were Black (18.2%)

Geographic Characteristics



- The highest proportions of patients receiving navigated care were in Medicare regions 3 (Philadelphia) and 5 (Chicago)

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