INCIDENCE AND COST OF HOSPITALIZATIONS FOR ACUTE URINARY RETENTION ATTRIBUTABLE TO BENIGN PROSTATE HYPERPLASIA IN FRANCE

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OBJECTIVES: Acute urinary retention (AUR) is one of the most significant complications of long-term benign prostate hyperplasia (BPH) and often leads to prostate surgery. AUR also represents an important and feared event that is quantifiable from an economic perspective as well as from the viewpoint of BPH patients.

METHODS: French hospital information program (PMSI) databases from 2005 to 2008 were used to assess the number of hospitalizations for AUR and their management among males 250 years old with a diagnosis of BPH. Number of patients concerned and rates of re-hospitalizations and deaths due to AUR were estimated using the linking system of the PMSI. Cost estimation was performed for the year 2008 adopting the Sickness Funds perspective.

RESULTS: During the 4-year period, AUR frequency increased to 38,914 hospitalizations (+20.5%, +8.2%, +1.2% compared with 2005, 2006 and 2007, respectively). In 2008, mean length of stay was 5.5 ± 6.9 days and decreased of 6.6% within the study period. Proportion of stays referred by emergency department was 28.6% (14.1%, 20.6%, 25.3% in 2005, 2006 and 2007, respectively).

CONCLUSIONS: AUR attributable to complicated BPH globally increased but tend to become stable in 2008. However, proportion of emergency utilization and recurrent stays amplified. Despite appropriate available therapies, prevention of BPH complications remains suboptimal.