



PRE-OPERATIVE URODYNAMIC EVALUATION IN FEMALE MEDICARE PATIENTS UNDERGOING A STRESS URINARY INCONTINENCE

Introduction

The AUA/SUFU Guideline outlines the evaluation and treatment of stress urinary incontinence (SUI) and state that urodynamic (UDS) testing may be omitted in healthy females who have not undergone a prior SUI procedure. This recommendation is largely based on the data reported in the seminal Value of Urodynamic Evaluation (ValUE) trial from 2012. We sought to investigate the rates of UDS testing in those undergoing a SUI procedure before and after the ValUE trial publication.

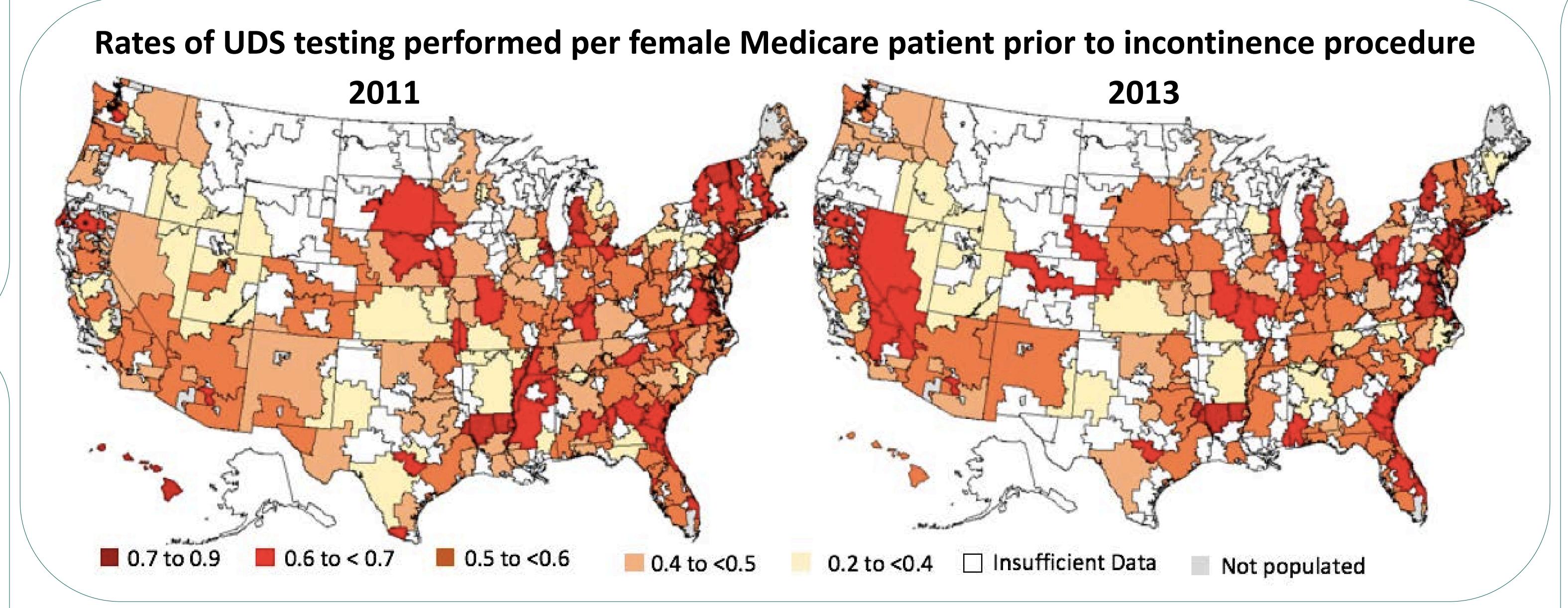
Methods

- Dartmouth Institute's Atlas Rate Generator, 100% Medicare claims data for 2011 and 2013
- 306 hospital referral regions (HHRs)
- Females with a diagnosis of SUI by ICD-9 codes + CPT code for urethral bulking or urethral sling procedure
- Calculated proportion of those who had a CPT code for UDS within one year prior to SUI procedure

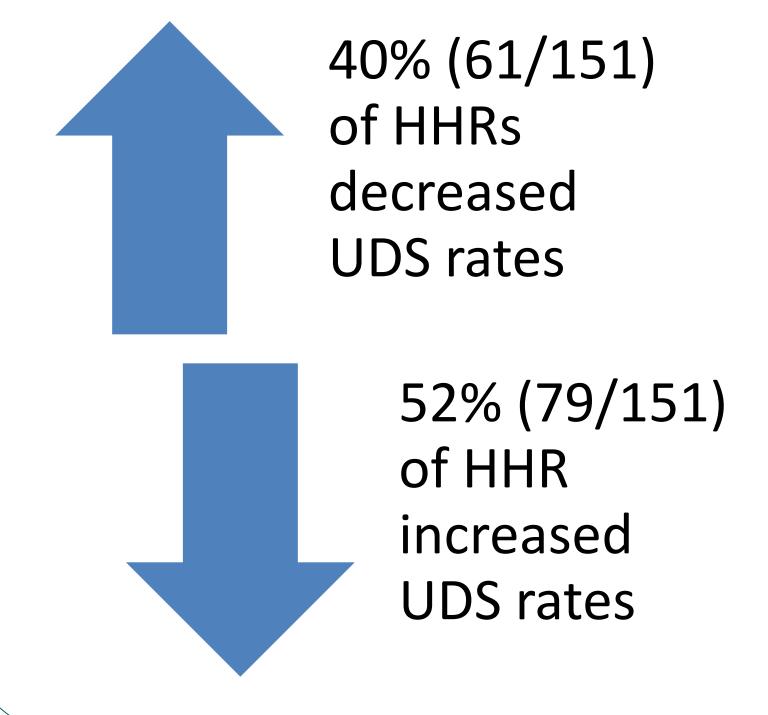
UDS Procedure	CPT Code
Urodynamics	51728, 51729
Complex cystometrogram	51726
Simple uroflometry	51736
Pressure-flow study	51797
Cystogram	51600
EMG	51784, 51785
Simple cystometrogram	51725
Cystography	74430

PROCEDURE: RATES BEFORE AND AFTER THE VALUE TRIAL

Annah Vollstedt MD, Rachel Moses MD, MPH and E. Ann Gormley MD Dartmouth-Hitchcock Medical Center, Lebanon, NH



Percentage of HHRs with Change in UDS Rates from 2011 to 2013



HHRs with Highest and Lowest Pre-operative UDS Rates

Pre-operative UDS evaluation		
	2011	2013
National average	53% (16020/30131)	55% (11,772/21579)
Highest rate	Monroe, LA 81% (48/59)	Longview, TX 88% (43/49)
Lowest rate	Jonesboro, AR 22% (14/64)	Springfield, MO 22% (22/99)

Conclusions

- Significant regional variation in utilization of UDS in those undergoing a SUI procedure
- Nationally, the overall rates of pre-op UDS did not change significantly after the publication of the ValUE trial
- Larger proportion of HRRs demonstrated increased or unchanged rates between 2011 and 2013
- Further research is needed to investigate the differences in UDS testing after the distribution of the SUI AUA/SUFU guidelines

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