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Understanding Health Utilities in Women with Urinary Incontinence

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Presenter Information
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UNDERSTANDING HEALTH UTILITIES IN WOMEN WITH URINARY INCONTINENCE

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ABSTRACT

Objectives: The purpose of this study was to compare the health utility of UI in women as derived from the EQ-5D with the gold standard, the Standard Gamble. The secondary aim of this study was to compare health utility values of affected patients to healthy controls.

Materials and Methods: Clinical diagnosis was categorized as normal, stress, mixed or urge urinary incontinence. Healthy controls were read a scenario for stress or mixed UI. All subjects completed the Sandvik Severity Index (SSI), EQ-5D, and Standard Gamble (SG) conversation.

Results: 50 healthy controls and 119 affected subjects were recruited. The mean utility value for incontinence varied based on method: EQ-5D (0.78 + 0.17) and SG (0.85 + 0.20). There was a significant difference between utility scores derived from SG and EQ-5D (p=0.0004). This significant difference was maintained in the subset of women with SUI: EQ-5D (0.81 + 0.16), SG (0.87 + 0.18), p=0.028; but not in women with MUI or UUI. When comparing healthy controls to women with SUI, there were significant differences in the utility values derived by SG (0.76 + 0.26 vs. 0.87 + 0.18, p=0.07) but not by EQ-5D. When comparing healthy controls to women with MUI, there was also a significant difference in the utility derived by SG (0.92 + 0.10 vs. 0.75 + 0.21, p=0.01) but not by EQ-5D. SSI scores moderately correlated with SG utility values and strongly correlated with EQ-5D utility values. Logistic regression analysis showed that utility values were unaffected by age and menopausal status.

Conclusion: This study suggests that using the EQ-5D to quantify the utility of UI may over-estimate the degree of bother when compared to SG assessment. This is important because the SG process more closely approximates the decision to undergo surgery. Relying on the EQ-5D to assess health utilities in women with UI may not be valid.