Analysis of the Health Care Cost and Utilization Project (HCUP) shows that the total annual charges and costs for inpatient care of patients with radiation cystitis are rising.

William R Boysen, Brian M. Inouye, Andrew C Peterson

Duke University Division of Urology
Durham, NC USA
Objectives and methods

• Advances in care for the cancer survivor have lead to increased longevity, with the potential for increasing risk of long term treatment toxicity and need for survivorship care
  – We sought to determine trends the rate and cost of inpatient management for radiation cystitis

• Queried the HCUP National Inpatient Sample using ICD-9 code for radiation cystitis
  – Limited assessment to male patients
Results and Conclusions

Inpatient visits increased significantly from 1997-2015, 1.25 to 2.00 per 100,000

The incidence of hospital discharges for radiation cystitis is rising

Mean charge per encounter has gone up over time, with no change in cost per encounter

Annual aggregate costs have risen to over $50 million, driven by increased admissions

The incidence of hospital discharges for radiation cystitis is rising

The charges per encounter have increased over time, while costs have been stable

The annual aggregate costs for treating radiation cystitis have risen to over $50 million, driven by the increased incidence of admissions