Admissions for urinary tract infections are increasing for young adults with spina bifida in the United States, 2006 to 2016

Christopher Loftus MD¹,² Jennifer Ahn MD² Judith Hagedorn MD¹ Mark Cain MD² Sarah Holt PhD¹ Paul Merguerian MD² Margarett Shnorhavorian MD MPH²

¹University of Washington, Department of Urology
²Seattle Children’s Hospital, Department of Urology
Disclosures

> none
Methods & Results

• Young adults with spina bifida are at high risk for poor health outcomes during transition from pediatric to adult care (ages 18-25)

• National Inpatient Sample
  • Years 2006-2016
  • Spina bifida patients ages 18-25
    • N = 51,000
    • Two comparison groups

<table>
<thead>
<tr>
<th>SB ages 18-25</th>
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<tbody>
<tr>
<td>1  UTI/ Pyelonephritis - 11.0%</td>
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<tr>
<td>2  Pregnancy-related - 9.6%</td>
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<tr>
<td>3  Skin infections and chronic ulcers - 9.1%</td>
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<td>4  Sepsis - 7.7%</td>
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<tr>
<td>5  Shunt-related - 7.5%</td>
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• SB admissions increased 29.3% over study period

• Sepsis had largest increase and had longest mean length of stay (9.0 days) and the highest total mean hospital costs ($70,402)

• “Preventable” diagnoses accounted for 37.8% of admissions and were increasing
Results & Conclusions

> Database limitations

> Large increase in sepsis was seen in general population

> Rise in UTI admissions likely multifactorial

> Transitional and adult care requires increased emphasis on a national level
Thank you!

Questions?