



Food Access Environments of Patients with Urinary Tract Stones

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DISCLOSURES

- Neither author has financial or other conflicts of interest relevant to this topic

BACKGROUND

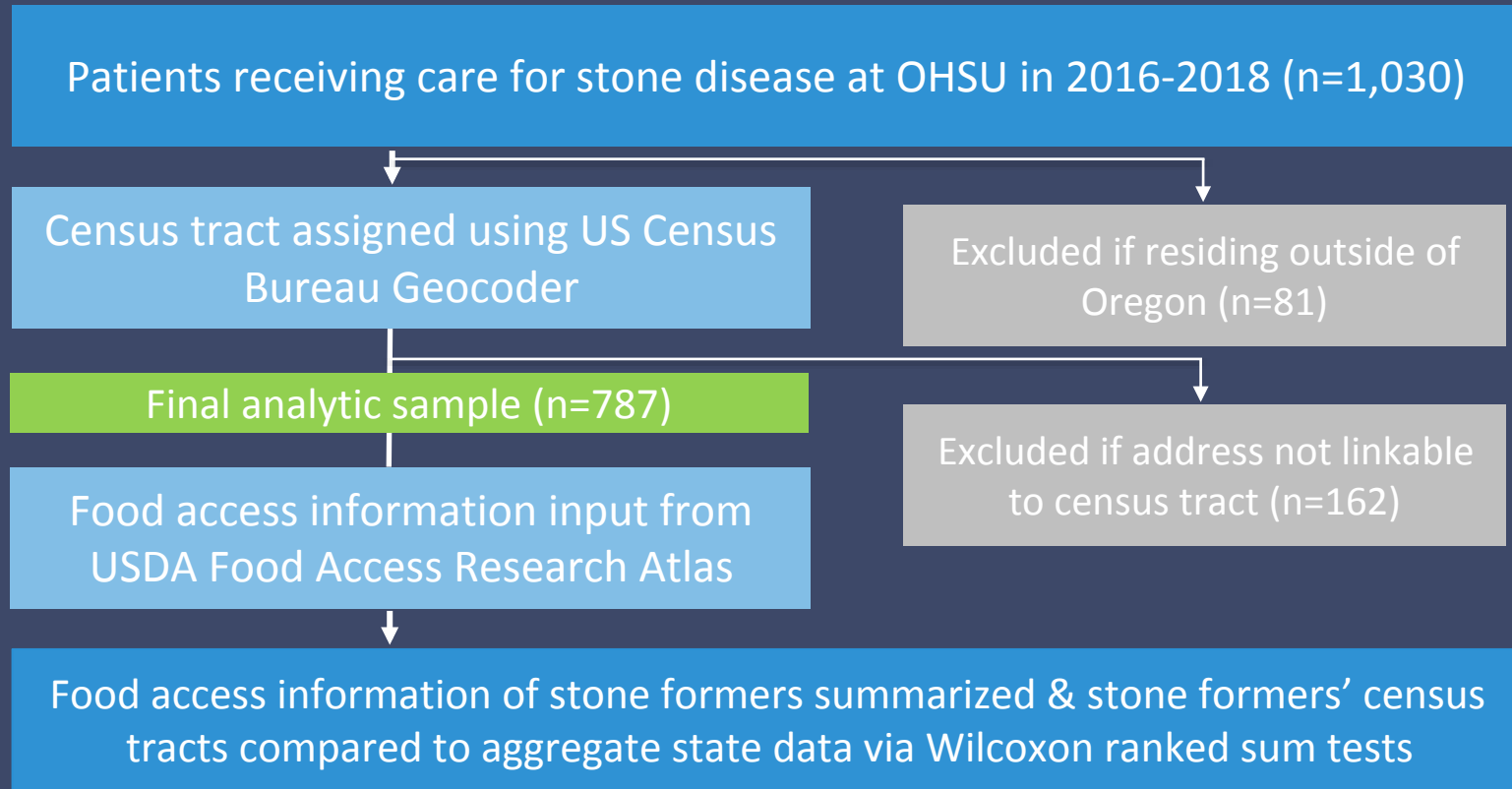
- Nearly 13% of U.S. population lives in low income, low food access environment
- Diet & geography influence risk of urinary stone formation
- Sociopolitical factors relatively understudied in etiology stone disease

AIMS

Describe food access environments of patients with stone disease

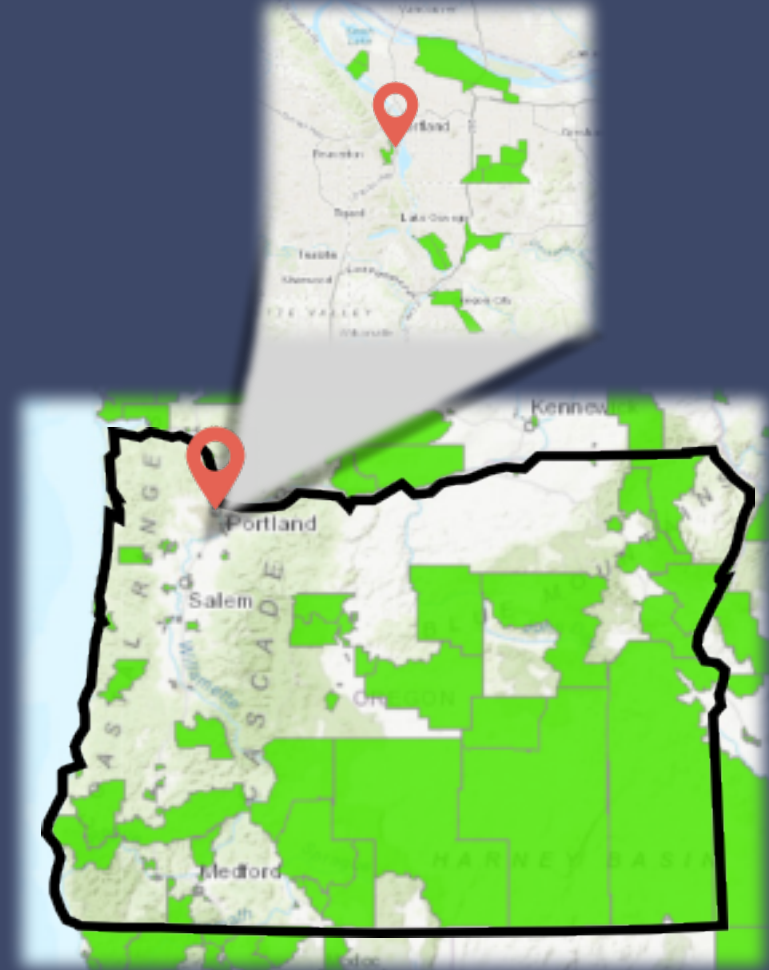
Compare food access measures to statewide population

METHODS



RESULTS

	Stone formers
<i>N</i>	787
Mean age (SD)	54 (17)
Female gender (%)	405 (51.5)
Mean BMI (SD)	30.4 (10.8)
Ethnicity (%)	
<i>Non-Hispanic</i>	723 (91.9)
<i>Hispanic</i>	53 (6.7)
<i>Other</i>	11 (1.4)



RESULTS

- 33% of stone formers lived in low food access areas
- 8.6% lived in low income, low access areas
 - Compared to 13.5% across the state of Oregon

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	Whole state	Stone formers	p-value
Census tracts represented	830	418	
Urban (%)	597 (71.9)	674 (85.5)	p < 0.001
Median family income (SD)	\$64,121 (24,288)	\$72,005 (27,324)	p < 0.001
Proportion families living at or below poverty level (SD)	16.8 (9.8)	15.7 (9.4)	p = 0.003
Low access (%)	294 (35.4)	133 (31.8)	p = 0.211
Low income & low access (%)	103 (12.4)	41 (9.8)	p = 0.014

LIMITATIONS

- Nested data – not comparison of cases to controls
- Population-level view of food access
- Stability of residence unknown
- Institutional sample

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CONCLUSIONS

- Approximately 1 in 3 stone forming patients live in low food access environments
- Patients served at academic medical center reside in higher income, greater food access than average in Oregon

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Urology



QUESTIONS

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