

THE OAB PATIENT JOURNEY:

a long, quiet river?

➔ **1 patient in 2** with bothersome symptoms of OAB has consulted **a doctor** ^{*1,2}

WHAT ARE THE OBSTACLES TO CONSULTATION?

TABOO



Patients are **reluctant** to report their problems.³

KNOWLEDGE



Patient's **poor knowledge** about OAB and **poor understanding** of its causes and the treatment options, are part of the main reasons of the delay in seeking help.⁴

WRONG BELIEFS



It is common for patients to **seek help late** because of the belief that OAB symptoms are a normal part of ageing.⁵

*From a 2009 American survey, n=162,906 respondents.

➔ The median **time to discontinue** for all drugs is **30 days**.^{§6}

WHAT ARE THE OBSTACLES TO MEDICAL CARE?

UNMET EXPECTATIONS



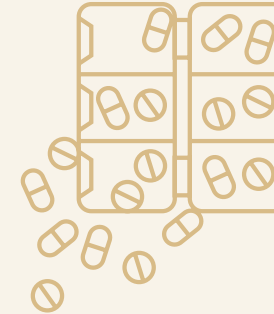
Patients have **unrealistic expectations** of the available treatment leading to discontinuation.³

ACTION TIME



OAB usually requires **long-term** treatment to achieve **control** symptoms.⁷

TREATMENT COMPLIANCE



The **overall persistence** rate for all drugs was **55%** in 30 days, **46%** in 90 days, and **37%** per year.^{§6}

§Study of treatment persistence in 46,079 women.

➔ **Half of patients never refill** their initial prescription ^{#8}

HOW TO IMPROVE THERAPEUTIC MANAGEMENT?

THE SHARED DECISION MAKING (SDM)

The gold standard for medical consultation.¹



43% of SDM assessments (n=42) found a **significant and positive relationship** between SDM and the patient outcome.^{▲9}

From a systematic review (147 articles and 2 abstracts) on persistence and adherence data in patients with OAB treated with anticholinergic therapy.

▲ From a systematic review of shared decision making and patient outcomes including 39 studies.

TO HELP: A FEW LEARNING POINTS FROM OAB PATIENTS...

Patients preferences and expectations, regarding OAB, from Cicione et al. 2023¹



«Patient satisfaction with treatment is directly related to **fulfillment of positive expectations**, which should be **jointly agreed upon by the patient and the physician.**»³

Medical treatment	Invasive treatment
An oral treatment which reduces urgency, frequency and incontinence episodes, with minimal adverse effects, particularly on cognitive function, and covered by insurance.	<ul style="list-style-type: none"> 3rd line treatments (i.e., sacral neuromodulation (SNM), onabotulinum toxin A, and/or percutaneous tibial nerve stimulation (PTNS)) are preferred over ileal conduit. Patient decision is influenced by device interactivity, effectiveness on continence and micturition frequency.

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Intended for Healthcare Professionals only.

Abbreviations

OAB: OverActive Bladder; AM: antimuscarinic.

References

1. Cicione A, Lombardo R, Umbaca V, Tema G, Gallo G, Stira J, Gravina C, Turchi B, Franco A, Mancini E, Nacchia A, Damiano R, Tubaro A, De Nunzio C. Patients' Preferences and Expectations in Overactive Bladder: A Systematic Review. J Clin Med. 2023 Jan 4;12(2):396. doi: 10.3390/jcm12020396. PMID: 36675324; PMCID: PMC9864850. 2. Benner JS, Becker R, Fanning K, Jumadilova Z, Bavendam T, Brubaker L; OAB Medication Use Study Steering Committee. Both related to bladder control and health care seeking behavior in adults in the United States. J Urol. 2009 Jun;181(6):2591-8. doi: 10.1016/j.juro.2009.02.018. Epub 2009 Apr 16. PMID: 19375096. 3. Milsom I, Wagg A, Oelke M, Chapple C. Which drugs are best for overactive bladder? From patients' expectations to physicians' decisions. Int J Clin Pract. 2021 Apr;75(4):e13870. doi: 10.1111/ijcp.13870. Epub 2020 Dec 11. PMID: 33251651; PMCID: PMC8047881. 4. Marschall-Kehrel D et al. Patient-reported outcomes in overactive bladder: The influence of perception of condition and expectation for treatment benefit. Urology 2006;68(Issue 2, supplement):29-37. 5. Beder D, Ashton P, Mishra V. Overactive bladder in women. BMJ. 2021 Dec 1;375:e063526. doi: 10.1136/bmj-2020-063526. PMID: 34853012. 6. Karin L, Igor M, Chen S, Yariv S, Grotz O, Jack B, Ofer Y, Shachar A. Persistence of overactive bladder pharmacological treatment in women as reflected from large-scale real-world data of prescription claims: A retrospective cohort study. Neurourol Urodyn. 2023 Sep;42(7):1491-1498. doi: 10.1002/nau.25238. Epub 2023 Jul 3. PMID: 37395464. 7. Dhaliwal P, Wagg A. Overactive bladder: strategies to ensure treatment compliance and adherence. Clin Interv Aging. 2016 Jun 3;11:755-60. doi: 10.2147/CIA.S69636. PMID: 27350744; PMCID: PMC4902140. 8. Sexton CC, Notte SM, Maroulis C, Dmochowski RR, Cardozo L, Subramanian D, Coyne KS. Persistence and adherence in the treatment of overactive bladder syndrome with anticholinergic therapy: a systematic review of the literature. Int J Clin Pract. 2011 May;65(5):567-85. doi: 10.1111/j.1742-1241.2010.02626.x. PMID: 21489081. 9. Shay LA, Lafata JE. Where is the evidence? A systematic review of shared decision making and patient outcomes. Med Decis Making. 2015 Jan;35(1):114-31. doi:10.1177/0272989X14551638. Epub 2014 Oct 28. PMID: 25351843; PMCID: PMC4270851.