Evaluation of Patient Initiated Antibiotic Seeking Habits for Urinary Tract Infections (UTI) as a Result of Symptom Recognition and Over the Counter (OTC) Product Use

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Disclosure Statement

No conflicts to disclose

Background



Background

- Urinary tract infections (UTIs) are the most common outpatient infections in the United States
 - Bacterial infection commonly requiring antibiotics for treatment
 - Lifetime incidence of 50-60% in adult women
- Common symptoms of urinary tract infections:
 - Frequency and urgency of urination
 - Burning sensation when urinating
 - Pelvic pain/pressure
 - Small amounts of urine



Medina M, *Ther Adv Urol.* 2019 Hooton TM, *N Engl J Med.* 1996

A GROWING CRISIS WORLDWIDE

In the EUROPEAN UNION,

antibiotic resistance causes 25,000 deaths per year and 2.5m extra hospital days¹





In INDIA, over 58,000 babies died in one year as a result of infection with resistant bacteria usually passed on from their mothers²

In THAILAND, antibiotic resistance causes 38,000+ deaths per year and 3.2m hospital days³





In the UNITED STATES, antibiotic resistance causes 23,000+ deaths per year and >2.0m illnesses⁴

Background

- Prior research suggest that patient preferences influence physician prescribing of antibiotics
- Increasing antibiotic resistance is a global health issue
 - Over-use of antibiotics is one contributing factor
- New policies and initiatives forged by the CDC, UN and WHO for reducing antimicrobial resistance.
- Unknown if UTI symptom recognition and use of newer OTC products influence patient preference
- Unnecessary use of antibiotics places patients at risk for side effects

Havers FP, JAMA Netw Open. 2018 Gill JM, Fam Med. 2006 CDC Threat Report. 2019



To compare antibiotic seeking habits among women with:

- 1. accurate vs. inaccurate symptom recognition
- 2. use vs. no use of over-the-counter urinary tract infection products

Purpose



• REDCap created 31-item web-based survey

- Evaluation period May 15, 2020- August 5, 2020
- Constructed of discrete and open-ended questions
- Preexisting survey panel listserv (ResearchMatch.org)
 - Originally recruited to respond to surveys revolving around antibiotics and infections
 - \$20 gift card incentive was offered (20 participants selected from drawing of first 100 responders)
- Inclusion criteria:
 - o Female
 - Respondents age ≥ 21 years
 - Consenting



- Statistical analysis
 - Frequency of requesting behavior compared across predictors using the Chi-Square test via SAS
 - Symptom recognition
 - OTC product use

| Symptom | Recognition |
|-----------------------|-------------------|
| ✓ | $\mathbf{\Theta}$ |

| Correct | Incorrect |
|---|---|
| Burning sensation when urinating Persistent urge to urinate Pelvic pain/pressure Small amounts of urine | SmellAppearanceBloating |
| "All correct" | "Only correct" |
| All the symptoms + possibly other incorrect symptoms | Only the correct symptoms with no other identified symptoms |



- Open-ended survey questions were coded for analysis by investigators using Microsoft Excel
- Medication or test advertised for use to treat, prevent or diagnosis UTI







Qualified OTC product

Unqualified OTC product

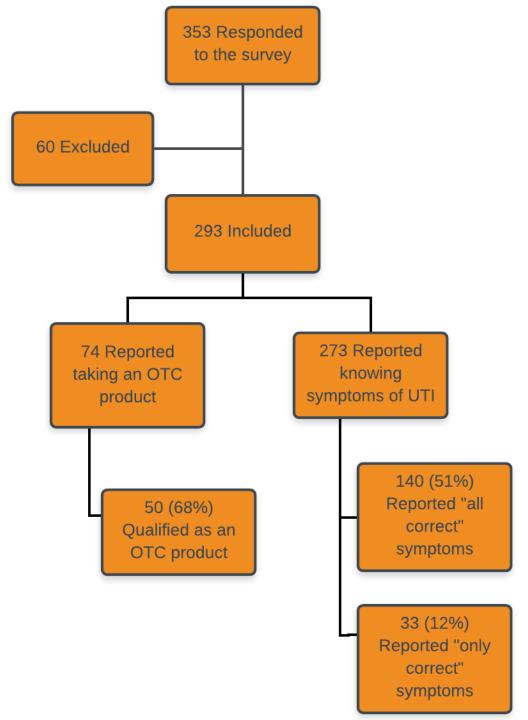
- Phenazopyridine
- UTI diagnostic strips ("Dip Stick")
- Cranberry capsules or tablets

- Left-over antibiotics
- Home remedies
- Complementary medicine
- Products for yeast infections
- Unreported





Results



Results: characteristics of cohort

| Age | | (n/N) | % | | | |
|-------------------|---------------------------------------|---------|----|--|--|--|
| | 21-29 | 7/293 | 2 | | | |
| | 30-39 | 59/293 | 20 | | | |
| | 40-49 | 46/293 | 16 | | | |
| | 50-59 | 52/293 | 18 | | | |
| | 60+ | 129/293 | 44 | | | |
| Race ⁺ | | | | | | |
| | White | 263/290 | 91 | | | |
| | Black or African American | 9/290 | 3 | | | |
| | Asian | 4/290 | 2 | | | |
| | American Indian/Alaskan Native | 1/290 | 0 | | | |
| | Other | 10/290 | 4 | | | |
| Education | | | | | | |
| | High school graduate or equivalent | 5/291 | 2 | | | |
| | Some college credit | 28/291 | 10 | | | |
| | Associate degree | 16/291 | 5 | | | |
| | Bachelor's degree | 99/291 | 34 | | | |
| | Master's degree | 93/291 | 32 | | | |
| | Doctorate degree, non-healthcare | 38/291 | 13 | | | |
| | Healthcare Professional degree | 12/291 | 4 | | | |
| Sought me | dical care for suspected UTI | | | | | |
| | Yes | 228/289 | 79 | | | |
| Doctor cor | firmed UTI for those that sought care | | | | | |
| | Yes | 217/228 | 95 | | | |
| Asked for | ted for an antibiotic | | | | | |
| | Yes | 59/214 | 28 | | | |

Results: symptom recognition of included respondents (n=293)

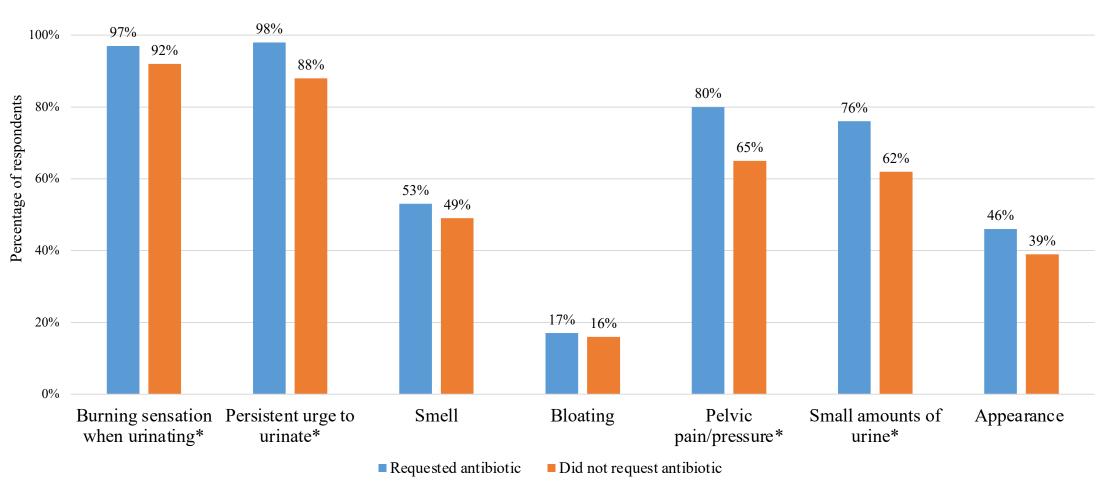
| Symptom | n (%) |
|-----------------------------------|-----------|
| Burning sensation when urinating* | 269 (92%) |
| Persistent urge to urinate* | 257 (88%) |
| Smell | 144 (49%) |
| Bloating | 46 (16%) |
| Pelvic pain/pressure* | 189 (65%) |
| Small amounts of urine* | 181 (62%) |
| Appearance | 115 (39%) |

*correct symptom

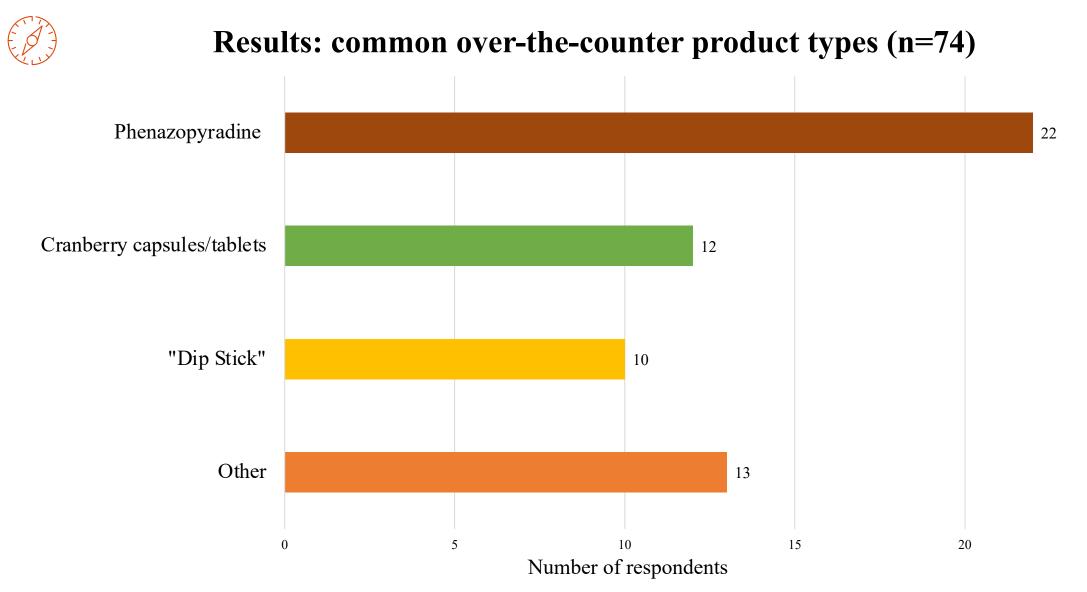


Results: symptom recognition stratified by requesting behavior (n=293)

120%



*correct symptom



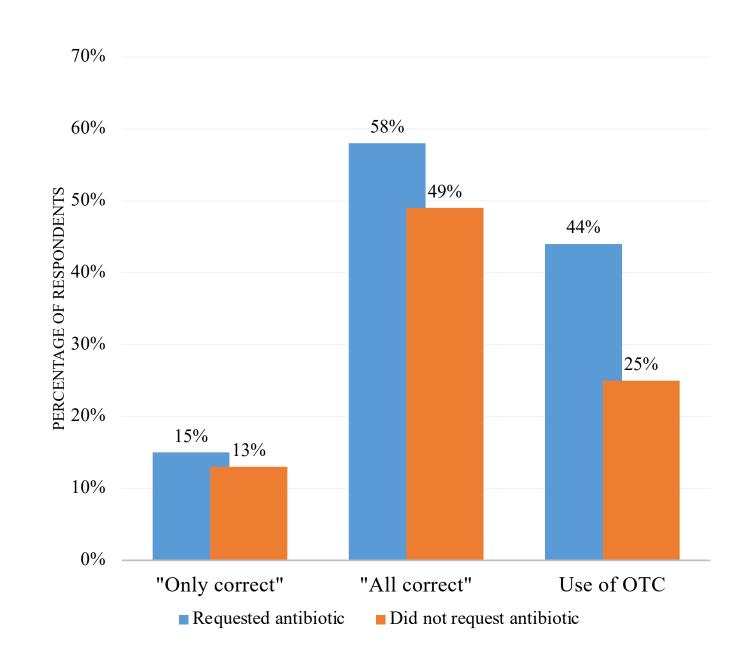
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^{**}Could have chosen more than one of these products



Results: symptom recognition and OTC use as predictors of antibiotic seeking behaviors

- Respondents that requested an antibiotic were more likely to use an OTC product (44% vs. 25%; *p*=0.008)
- Respondents that requested an antibiotic were **not** more likely to recognize correct symptoms (15% vs. 13%; *p*=0.65)



Conclusion



Conclusions



Symptom recognition <u>may</u> play a role in antibiotic seeking behaviors for UTIs



Use of OTC products <u>did</u> play a role in antibiotic seeking behaviors for UTIs



Strengths vs. weaknesses



Targeted education should focus on appropriate use of OTC products and symptom recognition most sensitive and specific for a UTI



Larger, more diverse population studies should be conducted in varying disease states



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