

# URINARY CATHETERS IN ENGLAND: COSTS, QUANTITIES AND ESTIMATED PREVALENCE OF USE 1998-2022

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## HYPOTHESIS / AIMS OF STUDY

Long-term voiding problems can be managed by intermittent catheters (IC) or indwelling catheters (IDC), but guidance recommends that IDCs should only be used when other methods including IC are not possible (1). Both have environmental and/or cost implications.

There is little published data on prescribing practices and prevalence of catheter users. A recent Dutch study using insurance data showed a rise over recent decades in the use of ICs but also a continued rise in use of IDCs (2).

In England, both IDCs and ICs are prescribed by qualified health care professionals and provided to community-dwelling patients via community pharmacists or dispensing appliance contractors (DACs). Prescribing data is published annually allowing for analysis of trends.

The aim of this study was to determine for England:

1. Annual costs of ICs and IDCs
2. Annual quantities of prescribed ICs and IDCs
3. Number of users of ICs and IDCs

## STUDY DESIGN, MATERIALS AND METHODS

All urinary catheters available for prescription in England are listed in the NHS Electronic Drug Tariff hosted by the NHS Business Service Authority (NHSBSA) (3). The NHSBSA publishes prescription dispensing data monthly, recording product description, quantities dispensed, item and total costs.

This study is an analysis of Prescription Cost Analysis (PCA) data from annual reports from 1998 to 2022. This is compared with data from the Netherlands.

## RESULTS

In England there has been more than a seven-fold increase in the total number of ICs prescribed over the last 24 years with a commensurate increase in cost and estimated numbers of users (Table 1). In comparison with the Netherlands (Figure 1), the trajectory of increase in the numbers of IC users is similar although the number of IC users in the Netherlands in 2018 is estimated to be much higher (2.5 times) than the number in England.

There was a gradual increase in the estimated number of IDC users in England from 1998-2022 (from 126 to 188 per 100,000 people). This contrasts with the Netherlands where the number of IDC users rose more steeply (from 159 to 315 per 100,000 people between 1997 and 2018).

In both England and the Netherlands, the number of IDC users is higher than the number of IC users but the number of IDC users in the Netherlands in 2018 was nearly double the estimated number in England (315 per 100,000 in the Netherlands and 171 per 100,000 in England).

## INTERPRETATION OF RESULTS

The rise in the number of estimated catheter users in England probably reflects the ageing population and the increase in incontinence procedures which affect voiding. The more gradual rise in IDC users may indicate that guidance to avoid the use of IDCs is being implemented. The differences in the prevalence of IC and IDC use between England and the Netherlands require more research and more data from other countries is needed. A better understanding of prescribing decision-making in different countries would be helpful.

Although IC is the first-choice device for the management of long-term voiding problems, ICs are mainly single-use, plastic-based devices with an environmental and cost impact.

In 2022 the number of ICs being discarded was more than 90 million in England alone, with annual costs of more than £160 million. The rise in the use of IC means that more sustainable approaches are needed to reduce the environmental and cost impacts.

A limitation of this study is that the estimates of user numbers were derived from the quantity of catheters prescribed per year and the mean number of catheters used per person (x 4 per day for ICs and x 13 per year for IDCs) rather than by the individual user. In the Netherlands population-based insurance data were analysed which is likely to be a more accurate estimate of the numbers of users.

## CONCLUDING MESSAGE

The number of IC users is rising in England as is the number of IDC users, but more gradually. There are differences in the prevalence of IC and IDC use between England and the Netherlands that deserve further investigation extending to other countries. The rise in the prescription of ICs has environmental and cost implications that merit mitigation with more sustainable approaches.

FIGURE 1

	Intermittent catheters			Indwelling catheters		
	1998	2010	2022	1998	2010	2022
Cost (£'000)*	27,549	93,088	165,731	10,768	11,922	11,535
Quantity ('000)	12,437	47,427	92,948	799	1,074	1,393
Users per 100,000 people**	17	62	111	126	157	188

\*Adjusted for inflation

\*\*Calculation based on assumed usage: 4 x ICs per day, 13 x IDCs per year

Table 1: Cost, quantity and number of users of intermittent and indwelling urinary catheters in England (1998-2022)

FIGURE 2

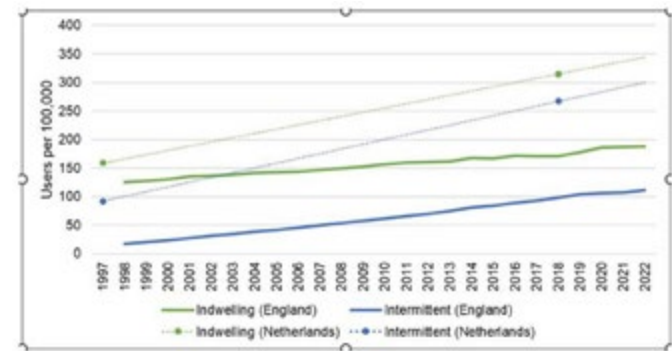


Figure 1: Estimated number of IDC and IC users from 1998 to 2022 in England compared with the Netherlands (1997 to 2018) per 100,000 population

## REFERENCES

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