

Accepted Manuscript

Title: Impact of Cystectomy with Urinary Diversion upon Tracked Receipt of Opioid Prescriptions among Patients with Interstitial Cystitis/Bladder Pain Syndrome

Author: David S. Koslov, Fernandino Vilson, Marc Colaco, Ryan P. Terlecki, Robert J. Evans

PII: S0090-4295(17)31201-3
DOI: <https://doi.org/10.1016/j.urology.2017.11.009>
Reference: URL 20757

To appear in: *Urology*

Received date: 27-7-2017
Accepted date: 3-11-2017

Please cite this article as: David S. Koslov, Fernandino Vilson, Marc Colaco, Ryan P. Terlecki, Robert J. Evans, Impact of Cystectomy with Urinary Diversion upon Tracked Receipt of Opioid Prescriptions among Patients with Interstitial Cystitis/Bladder Pain Syndrome, *Urology* (2017), <https://doi.org/10.1016/j.urology.2017.11.009>.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.



Title: Impact of Cystectomy with Urinary Diversion Upon Tracked Receipt of Opioid Prescriptions Among Patients with Interstitial Cystitis/Bladder Pain Syndrome

Keywords: Interstitial Cystitis, Urinary Diversion, Cystectomy, Opioids, Pain

Authors:

- 1) David S. Koslov, MD (Corresponding Author) – Wake Forest School of Medicine
Department of Urology
 - a. dkoslov@wakehealth.edu
 - b. [1 Medical Center Blvd, Winston-Salem, NC 27157](#)
- 2) Fernandino Vilson, MD
- 3) Marc Colaco, MD
- 4) Ryan P. Terlecki, MD
- 5) Robert J. Evans, MD

Abstract Word Count: 139

Manuscript Word Count: 1,422

Abstract:

Objectives: To compare opioid requirements before and after cystectomy for end stage Interstitial Cystitis/Bladder Pain Syndrome (IC/BPS) using a statewide tracking system.

Methods: Narcotic prescriptions were captured using the North Carolina Controlled Substance Reporting System for patients at a single institute undergoing cystectomy with urinary diversion (CWUD) for refractory, end stage IC/BPS between 2010-2017.

Values were documented for the year before and the year after surgery (excluding 30 days postoperatively to account for surgical pain) and converted to Morphine Equivalent (ME). Values were compared using the Student's T-test.

Results: Following CWUD, there was a mean decrease in opioid receipt per patient of 6,535 ME/year ($p = 0.321$). 8/26 (31%) had not filled any opiate prescriptions for the preceding 3 months at time of manuscript.

Download English Version:

<https://daneshyari.com/en/article/8775771>

Download Persian Version:

<https://daneshyari.com/article/8775771>

[Daneshyari.com](https://daneshyari.com)