Indirect benefits of the financial crisis on the national health service – A reduction in the incidence of urolithiasis in the greater area of Lisbon-Portugal

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Introduction: Since the 70s, we have monitored the stone prevalence and incidence in Portugal. The latest follow-up is underway and we already have data on the Greater Lisbon Area (G.Lisbon.A), where 1/5 of the population lives. Over the years both, prevalence and incidence have been progressively rising. In the last 10 years the financial situation has drastically changed with decrease in spending power.

Material and Methods: For the G.Lisbon.A a survey is being undertaken of 5 years of age and older. The data was collected by trained investigators with a questionnaire, used in previous studies. Telephone interviews were also carried out using tested samples for each region (1/5 of the calculated values for each region). For the G.Lisbon.A we collected data from 5354 questionnaires.

Results: 58.5% interviews were from women 45.5% from men. 94.1% were Leucodermics 4.6% Melanodermics and 1.3% other ethnicities. Stone history was found in 9.5% of the sample. A mean prevalence of 10% in men and 9.1% in women. The incidence from 2008 to 2012 dropped from 541.6 to 298.8 / 100000 habitants. 94.5% went to the hospital during the stone episode. Of those who were hospitalized 26% had some kind of "surgical" intervention. Economic analysis of the gains from this decrease in the number of stone patients going to the main hospitals shows the impact that a prophylactic attitude (in this case, the financial crisis) can have on the number of stone patients in the country. If data from this region is applied to the whole country, taking only the new cases into account, the annual gain would be around 17 millions of Euros.

Conclusions: Data shows that stone incidence in the Greater area of Lisbon, between 2008 and 2012 dropped dramatically. This is certainly related to the loss of economic spending power over the last 10 years. This has translated into a huge decrease in spending from patients visiting the hospital in renal colic.