

2022 Global Urology Survey

The World's Largest* Kidney Stone
Patient Experience Survey



Dornier MedTech

Methodology

The 2022 Global Urology Survey was conducted by Dornier MedTech between November 2021 and January 2022, with the objective of understanding kidney stone patients' lived experiences and attitudes towards key topics identified by the Dornier MedTech team.

*More than 1,000 responses were submitted by members of the "Worst Pain Ever" kidney stone patient community on Facebook, making this the largest kidney stone patient experience survey conducted to date.

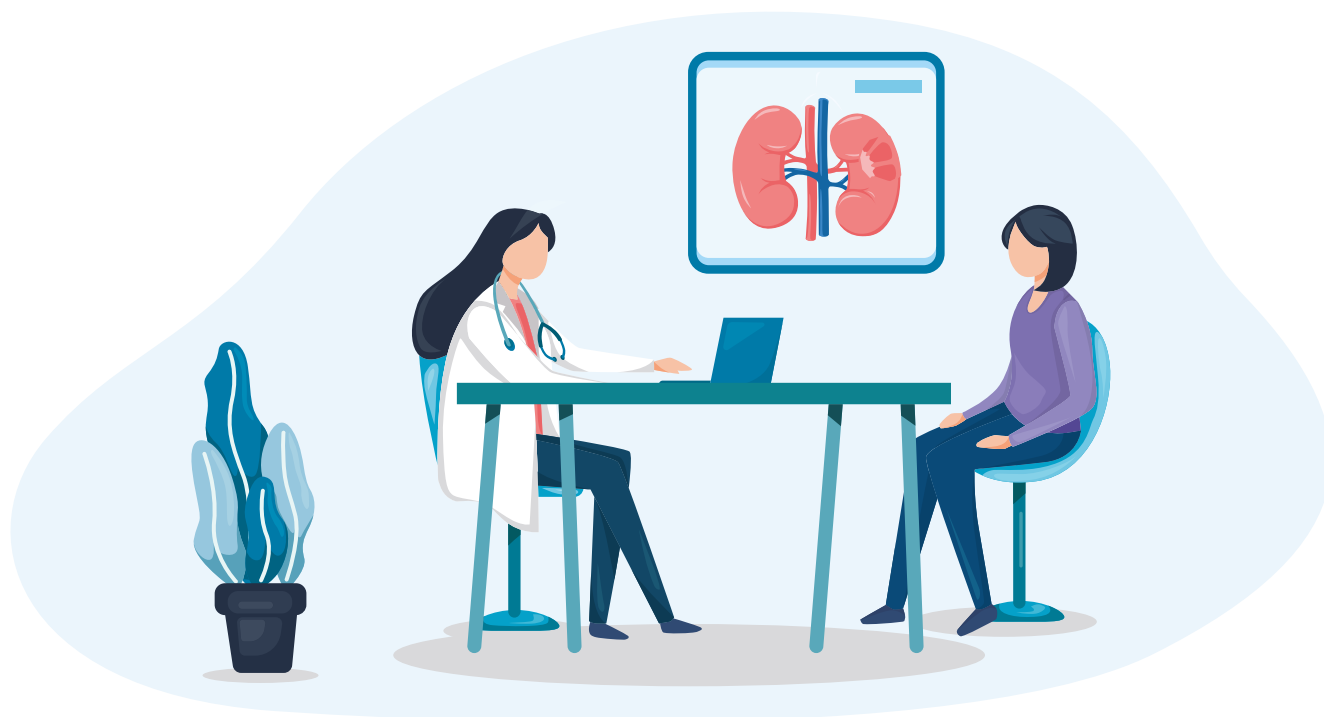
The findings presented in this Report are based on subsequent analyses by the Dornier MedTech team.



About Dornier MedTech

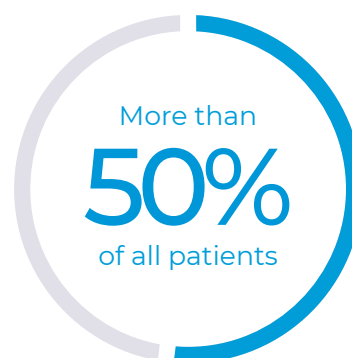
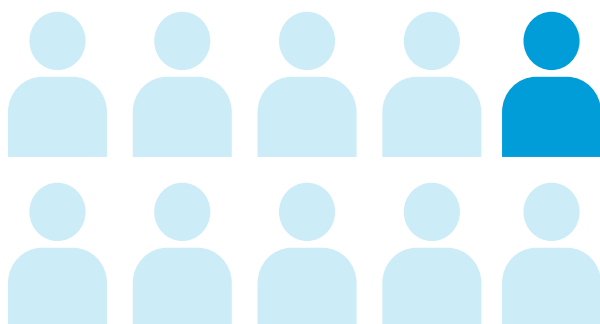
Dornier MedTech is a medical device company headquartered in Munich, Germany, and is a full subsidiary of Advanced MedTech. As a pioneer in the field of urology, Dornier is one of the most trusted names in the industry. Dornier continues to spearhead innovation in urology, launching more than 25 urology device innovations in the last 5 years. It is pushing the envelope in digital urology to provide holistic care to patients who are seeking treatment and community, as they work through their conditions online and in real life.

BECOMING THE TOP CHOICE FOR PATIENTS



Urolithiasis, better known as kidney stones, affects 1 in 10 people in the United States¹. More than 50% of these patients will experience repeat stone incidents in their lifetime², and new studies suggest that stone incidents are on the rise, with annual cumulative stone incidence fast approaching 1%³.

1 in 10 people in the U.S. are affected by kidney stones in their lifetime



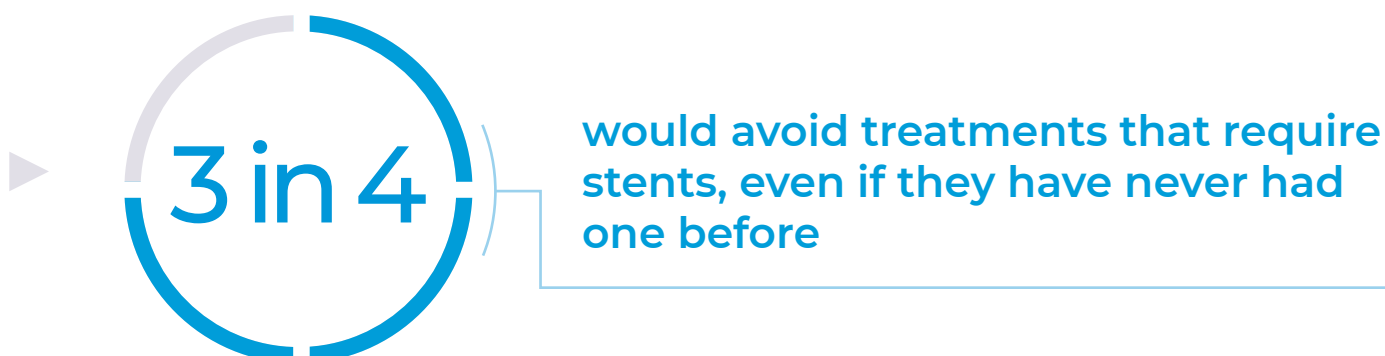
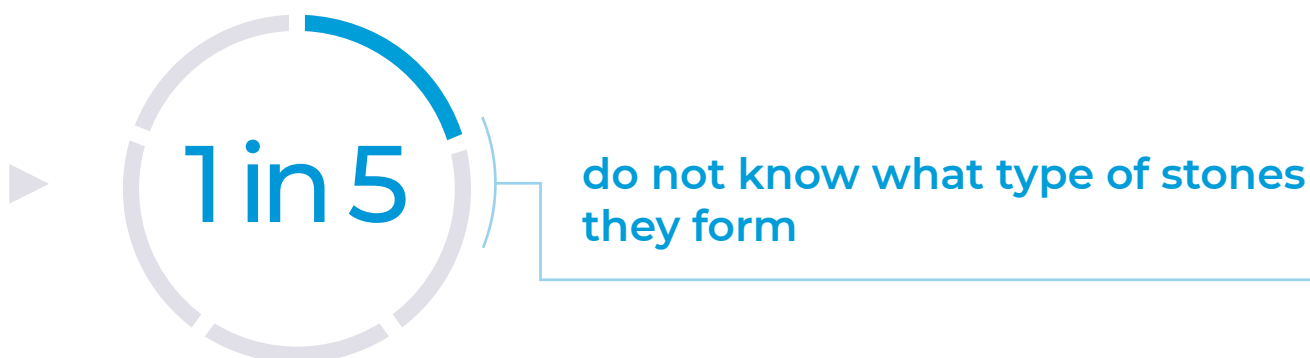
will experience repeat stones incidents in their lifetime

Just as technology has revolutionized the ways that healthcare is delivered, it has likewise transformed expectations of care. Digital connectivity, social media and a growing marketplace have turned once-passive patients into active consumers of healthcare services. Presented with options across the full spectrum of insurers, healthcare providers, treatments and even medical devices, patients today are empowered to make decisions that best align with their personal goals.

In view of growing healthcare consumerism, urologists are confronted with the pressing question: How can you make patients choose you?

It starts with knowing what patients want.

HIGHLIGHTS FROM THE KIDNEY STONE PATIENTS SURVEYED



PATIENT DEMOGRAPHICS

Millennials Are Getting Stones

Millennials are beginning to approach their stone-forming years, with more than 40% of patients surveyed developing their first stone under the age of 35. Early onset of urolithiasis can mean many more years spent managing and treating kidney stones, as well as its complications.

For a staggering majority of patients in our kidney stone community, this first stone is only the beginning – more than 90% are recurrent stone formers. Having experienced multiple stones in their lifetime, these patients grapple with concerns that differ significantly from a first-time stone former.

The Active Patient Participant

Unlike first-time stone formers, recurrent stone formers are well-acquainted with the symptoms of a kidney stone. Many are able to identify, and even anticipate, when a stone is passing. Instead of a diagnosis, recurrent stone formers are most concerned with undergoing stone treatment as quickly as possible.

Yet, these patients often struggle to convince medical practitioners of the salience of their opinion. Stone pain and nausea are dismissed or re-evaluated as symptoms of other medical conditions, thereby prolonging the diagnosis and treatment process.

“How frustrating it is to be in pain, trying to pass a stone, and being asked ‘How do you know it’s a stone?’ ”

For such patients to receive timely and optimal care, urologists should factor in their patients’ input during diagnostic assessment. Studies have shown that encouraging patient participation can support better health outcomes through improved decision-making⁴.

The Struggle of Prevention

Most patients are eager to prevent recurrent kidney stones and the excruciating pain that comes with them. To effectively do so, they must first understand their stone types and causes. Yet, gaps in patient education are impeding such stone prevention efforts.

1 in 4 don't know how to manage stones through their diet



Calcium oxalate stones are the most common form of kidney stones, and are best managed through lifestyle changes, such as the adoption of an oxalate-controlled diet. However, 1 in 4 patients surveyed are unaware of the foods they should include or avoid.

For the majority who have some knowledge of a kidney stone-friendly diet, the lack of personalized recommendations ultimately leads to struggles – or even failure – in implementation. As an oxalate-controlled diet involves restricting salt and animal protein intake, patients may find it difficult to introduce fresh produce and eliminate processed foods from their diet.

“Diet and nutrition is more than a pamphlet.”

Some patients also emphasized the ineffectiveness of generic advice dispensed in kidney stone education pamphlets, highlighting the need for deeper guidance. In such cases, including a dietician in the patient’s stone management team may be useful towards advancing a more holistic and sustainable stone management strategy.

MUST-HAVE ATTRIBUTES IN A UROLOGIST

Patient consumerism – the practice of searching and choosing a healthcare provider – is on the rise, and physicians across various disciplines have been finding new ways to market themselves. However, it is still the urologist’s conduct that holds the most sway over kidney stone patients. Visits to the E.R. and the urologist’s office are especially commonplace for recurrent stone formers, making the urologist a vital touchpoint in their journey. Providing patients with consistently positive treatment experiences encourages continuity of care, which contributes to better outcomes.

Top three qualities that kidney stone patients consider most important

① HIGHLY SKILLED

② RESPONSIVE

③ GOOD BEDSIDE MANNERS

Skill and Responsiveness

Treatment success is the goal for all physicians and patients. It is no surprise then that kidney stone patients unanimously believe a “good” urologist should be first defined as one who is highly skilled. Interestingly, responsiveness ranks a close second.

The severe pain triggered by a kidney stone event is the foremost symptom that prompts patients to seek urgent medical attention. In that moment, their needs are clear: to get immediate pain relief. However, this can be thwarted by lengthy admission processes, long queues and delays in consultations.

“I should be seen immediately, before the men with prostate issues or erectile dysfunction.”

A more efficient admission process will ensure that urgent cases are promptly attended to, and that urologists are able to maintain a high quality of care for all patients. Smaller clinics may benefit from implementing a structured triage system, establishing a phone system for patient queries and streamlining admission processes for recurrent patients.

Redefining “Care” in Quality of Care

Good bedside manners rounded up the top three qualities that kidney stone patients consider most important; outranking other soft skills such as friendliness, empathy and emotional support.

At its core, it is about communicating both the physician’s concern for the patient’s condition, and their commitment towards treating it.

“Treat us with compassion. Textbook training only goes so far.”

Pain is so central to the kidney stone experience, that patients interpret their urologist’s response to their pain as a reflection of their approach towards the patient at large.

In fact, when asked to name one thing that they wished their urologists knew, 1 in 2 patients cited their urologists’ understanding of their stone pain. As most recurrent stone formers develop longstanding relationships with their urologist, prolonged and frequent interactions give prominence to the presence and quality of bedside manners.

Essentials of Good Bedside Manners



ACTIVE LISTENING



SHOWING RESPECT



BEING ON TIME



SIMPLIFYING EXPLANATIONS WITH METAPHORS

TREATMENT PREFERENCES AND PAIN POINTS

A key tenet of quality care is helping patients make an informed choice about their treatment options. In recent years, advances in medical technology and patient education efforts have certainly eased this process. While urologists continue to recommend kidney stone treatments based on stone type, size and position, knowledge of kidney stone patients' changing preferences and pain points can assist the treatment recommendation process.

Top Treatments for High Patient Satisfaction

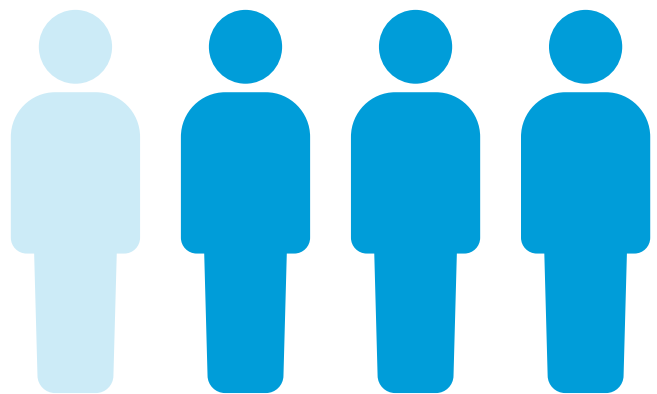
Of the four most common treatment types and natural stone expulsion, kidney stone patients were most satisfied with their ureteroscopy (URS) and shock wave lithotripsy (ESWL) experiences. More than 2 in 3 patients rated these treatments positively, with an overall satisfaction rate of 70% for URS and 69% for ESWL. Prior studies have also established that URS and ESWL are comparable in terms of patient satisfaction⁵. In stark contrast, close to 40% of patients were dissatisfied with their experience of passing stones naturally.

Stents VS Stones

For patients, one of the biggest considerations between URS and ESWL is the need for stents. Close to 64% of urologists worldwide⁶ routinely insert stents after URS, though stents have been associated with more complications, such as hematuria, irritative urinary symptoms and infection⁷.

Our analysis shows that patients widely regard stents as a deeply negative experience, with stents receiving a low average rating of 3 out of 10. More than 65% of these patients identified stent-related pain and discomfort as the worst part of having stents. Prior studies have also confirmed that stent-related pain significantly reduces patients' overall quality of life⁸.

3 in 4 patients would avoid treatments that require stents, where possible



As online patient discussions are rife with negative anecdotes, stents have since been widely regarded as an undesirable complication of kidney stone treatment. Overall, 1 in 3 patients surveyed believe that stents are more painful than stones, regardless of whether they have personally had stents.

This growing aversion towards treatments that require stents can have implications on the stone treatment decision-making process. Urologists should assess the patient's willingness to undergo stents and consider proposing alternative treatment methods, when suitable. Comprehensive patient education is critical towards establishing reasonable expectations of stent-related side effects, and reducing the risks of infection.



MOVING FORWARD

Patient behaviors are evolving at an unprecedented rate, bolstered by widespread social media use and rapid information flows. Kidney stone patients today are making more decisions than ever, particularly due to the recurrent nature of their condition. In this report, we sought to outline the latest behavioral trends, the key drivers behind patient decisions, and the opportunities for urologists to achieve better outcomes.

As we encounter the new model of the active patient-consumer, it is imperative that we

embrace the changes that this necessitates. Ultimately, it is still about finding ways to improve the quality of care – a sincere urologist-patient conversation can go far in showing patients that we hear their concerns, and that we are committed to relieving their pain and helping them better manage their condition.

While this report serves as a blueprint, adaptation will be key to successful implementation.

Because now, you know what your patients really want.



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CONTACT US

HEADQUARTERS

DORNIER MEDTECH GMBH

Argelsrieder Feld 7
82234 Wessling
Germany
Phone: +49-8153-888-0
Fax: +49-8153-888-665

AMERICA

DORNIER MEDTECH AMERICA, INC.

1155 Roberts Boulevard N.W.
Kennesaw, Georgia 30144
U.S.A.
Phone: +1-770-426-1315
Fax: +1-770-514-6291
Email: info@dornier.com

ASIA/PACIFIC

DORNIER MEDTECH ASIA PTE LTD

2 Venture Drive #23-18
Vision Exchange
Singapore 608526
Phone: +65-6572-6068
Fax: +65-6572-6093
Email: infoasia@dornier.com

CHINA

DORNIER MEDTECH CHINA

Room 3209
Shinmay Union Square, Tower B
999 Pudong South Road
Shanghai 200120
China
Phone: +86-4006769596
Email: info.china@dornier.com

JAPAN

DORNIER MEDTECH JAPAN

Meguro Estate Building
3-8-5 Kami-Ohsaki
Shinagawa-ku, Tokyo 141-0021
Japan
Phone: +81-3-3280-3550
Fax: +81-3-3280-3555
Email: info.japan@domedtech.co.jp

EUROPE

DORNIER MEDTECH EUROPE GMBH

Argelsrieder Feld 7
82234 Wessling
Germany
Phone: +49-8153-888-625
Fax: +49-8153-888-444
Email: infoeurope@dornier.com

DORNIER MEDTECH FRANCE SARL

Ferme de St Paul
1545 route d'Epagny
74330 Sillingy
France
Phone: +33-450-22-18-94
Fax: +33-450-24-24-63

DORNIER MEDTECH ITALIA S.R.L.

Via Di Grotte Portello 28
Palazzina B Clorofilla
0044 Frascati (Roma)
Italy
Phone: +39-348-0108208

DORNIER MEDTECH MOSCOW REPRESENTATIVE

Uliza Mytnaya 3
Office 21
119049 Moscow
Russia
Phone: +7-495-739-51-32
Fax: +7-495-739-51-33

DORNIER MEDTECH ESPAÑA, S.L.

Av. Alcalde Barnils, 64-68 Módulo
A - 1º 3ª
08174 Sant Cugat del Vallés
(Barcelona)
Spain
Phone: +34-93-203-9316
Fax: +34-93-205-3814