



#665 Autonomic Symptoms in Association with Pelvic Pain Warrants Work-Up

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BACKGROUND

- Small fiber neuropathy (SFN) is + in 66% of pts w complex pelvic pain who have NL neuro exam.
- SFN leads to **autonomic symptoms (ANS)** and **chronic overlapping pain syndromes (COPCs)** so Urologists see patients with SFN frequently (LUTS, ED, CPP).
- In patients with chronic pelvic pain (CPP), we assessed financial burden of small fiber neuropathy and, as a proxy for SFN, ANS and COPCs.

METHODS

- Anonymous data from a private insurer
- 12 months data 2022-2023 inclusive of all costs
- 4,306 patients reviewed
- 200 patients with pelvic pain R10.2 included
- 14 ICD-10 codes for ANS and COPCs

Symptoms	ICD10 Coding
Arrythmia	I49.9
Bowel	K58.9, K59.00 K59.02
Fibromyalgia	M79.7
GERD	K21.9
Migraine	G43.x
Palpitations	R00.2
Interstitial Cystitis	N30
Postural tachycardia syndrome	G90
Tinnitus	H93.19
Syncope	R55
TMJ pain	M26.609
Urinary Hesitancy	R39.11

Table 1: 14 ICD-10 codes chosen to indicate autonomic dysfunction and chronic overlapping pain syndromes in the population studied..

RESULTS

Demographics:

- Average age was 35.5.
- 2,282 (53%) were female, 2,023 (47%) male
- 200 (4.6%) patients had pelvic pain
- 22 (1.7%) pts had coded small fiber neuropathy
- Mean annual cost for this population was
 - \$9,280 for all members
 - \$28,829 for those with CPP
 - \$63,929 with SFN
 - \$108,061 for CPP and 3 autonomic comorbids

	Pelvic Pain (R10.2) and Comorbidities	N	Mean Spend (\$)	Median (\$)
	All Members	4306	9,280	2,056
	Pelvic Pain	200	28,869	7,913
SFN not Diagnosed	Pelvic Pain + 3 comorbidities	28	117,598	41,635
	Pelvic Pain + 2 comorbidities	29	17,513	10,628
SFN Diagnosed (G62.9)	Pelvic Pain, SFN (G62.9), + 3 comorbidities	1	375,105	375,105
	No Pelvic Pain, but ≥ least 1 comorbidity	15	47,594	26,455
	SFN (G62.9) with no comorbidities	6	55,239	13,206
	All SFN (G62.9)	22	63,929	23,931

Table 2: Pelvic pain with ANS/COPD co-morbidities showed increased financial burden

Pelvic Pain (R10.2) and Comorbidities	N	Mean Spend (\$)	P value
Pelvic Pain sx alone	90	8,802	
Pelvic Pain + 2 autonomic comorbidities	29	17,513	0.004

Table 3: Pelvic pain with ANS/COPD co-morbidities was statistically significant for increased financial burden

Small Fiber Neuropathy (G62.9)	N	Mean Spend (\$)	P value
Pelvic Pain sx alone	90	\$8,802	
All SFN (G62.9)	22	\$63,929	0.004

Table 4: SFN was statistically significant for increased financial burden compared to pelvic pain symptoms alone

Small Fiber Neuropathy (G62.9)	N	Mean Spend (\$)	P value
All SFN (G62.9)	22	\$63,929	
Pelvic Pain (R10.2) + 2 comorbidities	29	\$17,513	0.06

Table 5: SFN was not statistically significant for increased financial burden compared to patients with pelvic pain with automatic and COPD co-morbidities

CONCLUSION

- Pelvic pain is associated with SFN and multiple somatic and autonomic symptoms
- Cost data suggests patients with ANS and COPCs may have undiagnosed small fiber neuropathy
- Early diagnosis and more directed therapy accounting for autonomic dysfunction/ SFN may result in better outcomes and lower costs