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Impact of COVID-19 on Online Interest in Urologic Conditions: An Analysis of Google Trends

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Abstract

Background

With COVID-19 leading to several isolation measures for preventative care, health care utilization, especially within urology, decreased substantially. The impact of COVID-19 on the population's interests in urologic conditions remains to be established. By using the platform of Google Trends, which allows search behaviors and interest in healthcare topics to be quantified over time, we investigated the impact of COVID-19 on online search behaviors relating to common urologic conditions in the US.

Methods

The platform of Google Trends was utilized to analyze online interest in twelve common urologic conditions in the US from October 1, 2018 to August 1, 2021 (divided into "pre-COVID" and "COVID" periods at March 1, 2020). Search volume index (SVI), a measure of relative search volume on Google, data sets for the US, top queried and populated states, rising queries, and top queries were retrieved and analyzed for all conditions. Pre-COVID and COVID median SVIs were compared using the Mann Whitney U test, and correlations were analyzed using Spearman's rank-order correlation test.

Results

For all twelve urologic conditions, rising and top queries were often related to symptoms, treatments, and COVID-19. COVID showed higher SVIs for erectile dysfunction (p=0.04) and lower SVIs for bladder cancer (p<0.01), hematuria (p<0.01), kidney cancer (p<0.01), kidney stones (p=0.03), and prostate cancer (p<0.01). Correlations to COVID-19 searches were seen for bladder cancer (R_S =-0.36, p<0.01), erectile dysfunction (R_S =0.20, p=0.04), hematuria (R_S =-0.31, p<0.01), overactive bladder (R_S =-0.23, p=0.04), and prostate cancer (R_S =-0.33, p<0.01). No correlations were found for benign prostatic hyperplasia, interstitial cystitis, low testosterone, urinary incontinence, and urinary tract infections.

Conclusions

Online interest in many urologic conditions, especially cancers, decreased during COVID. Given the internet's increasing role in healthcare, a reduced interest could translate to delayed diagnosis and treatment of these conditions. Only erectile dysfunction showed increasing interest, potentially due to research or misinformation linking it to COVID-19.

Categories: Urology, Public Health, Healthcare Technology **Keywords:** infodemiology, google trends, urology, social media, patient education as topic, online content, covid-19

Introduction

As COVID-19 spread globally, self-isolation, social distancing, and national lockdowns became crucial to control the pandemic. Due to stay-at-home orders, internet services have seen 40-100% rises in usage compared to pre-lockdown levels [1]. Specifically, there has been an increasing public interest in COVID-19 in the USA [2,3], especially displayed on the internet. Google Trends[™] (Google LLC, Mountain View, California), a platform that quantifies search interests and trends on Google over time, is a powerful tool in analyzing public search patterns because Google accounts for greater than 70% of searches amongst other search platforms [4,5]. Since its launch in 2006, Google Trends has been used for healthcare-related research across various disciplines as the tool provides real-time insights into internet search behaviors by tracking and cataloging all Internet queries made through their web-based platforms. Data from these queries can then be used to study online health information-seeking behaviors, which patients engage in prior to appointments, and interest in various medical conditions and procedures, especially within urology [6,7].

Due to the highly personal nature of urologic conditions such as erectile dysfunction, prostate cancer, and urinary tract infection, the public will often "google" causes, symptoms, and treatments for their disorders

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[8,9]. In addition, the impact of COVID-19 on urologic conditions drew public concern and was propagated by social media [10-12], potentially due to the increasing use of the internet during the pandemic. Despite the variability in information accuracy and quality, internet use among men and women at risk of or diagnosed with urologic conditions makes it an important resource for decision-making, patient education, and support related to the disease [13].

Infodemiology is the science of distribution and determinants of information on the internet; data is leveraged to monitor online interest in health conditions and associated clinical implications [14]. Studies in urology have used infodemiology to determine that online interest in kidney stone surgery is constant despite the increasing prevalence and that interest in prostate cancer screening changed depending on The U.S. Preventive Services Task Force (USPSTF) guidelines [15,16]. However, the impact of COVID-19 on online search patterns for urologic conditions has not been investigated. The purpose of this study was to use Google Trends, a major search engine within the USA, to analyze internet search behaviors concerning the twelve most common Urologic conditions and their relation to COVID-19 at the national and state level.

Materials And Methods

Google Trends was queried for searches relating to the twelve most common urologic conditions and COVID-19 in the United States. The conditions analyzed included benign prostatic hyperplasia (BPH), bladder cancer, erectile dysfunction (ED), hematuria, interstitial cystitis, kidney cancer, kidney stones, low testosterone, overactive bladder (OAB), prostate cancer, urinary incontinence, and urinary tract infections (UTIs) [17,18]. Queries were limited to the USA and English language. The search period was from October 1, 2018 to August 1, 2021 to allow for analysis of searches 17 months before and 17 months after March 2020, when COVID-19 was declared a pandemic by the World Health Organization [19]. The midpoint was picked as March 1, 2020 because USA states started to declare a state of emergency and shut down at this point [20]. The period from October 1, 2018 to March 1, 2020 was marked "pre-COVID" (N=73 weeks), and from March 1, 2020 to August 1, 2021 was labeled "COVID" (N=75 weeks).

Google Trends gave data, split by week, on the search volume index (SVI), which is a measure of relative search volume on Google; the search is given a scaled value of 0 to 100, with 100 representing the peak search volume for the given search during the time period [4]. Searches analyzed on google trends were grouped phrases that allowed for all potential ways of searching a condition (e.g., "OAB" and "overactive bladder" would be incorporated under the search "bladder hyperactivity" when grouped as a "topic"). Data that was extracted included SVIs on the top five queried states (by proportion), populated states [21], rising queries (SVI not available), and top queries. Median SVIs were determined for the USA, top five queried, and top five populated states in the pre-COVID and COVID time periods.

The Mann-Whitney U test was used to compare pre-COVID to COVID median SVIs, and Spearman's rankorder correlation was used to determine the correlation between searches related to each urologic condition and COVID-19 during the COVID time period. The p-value used for statistical significance in the analysis was <0.05. All analyses were done on SPSS v27.0 (IBM Inc., Armonk, New York).

Results

Online interest in urologic conditions across the USA and various states was captured (Table 1). Rising queries and top queries for the conditions related to definitions, symptoms, management, treatments, and relation to COVID-19. Peak search (SVI=100) times in the USA were identified for the urologic conditions. Bladder cancer, hematuria, interstitial cystitis, kidney cancer, kidney stones, OAB, and prostate cancer searches had pre-COVID peaks. ED, low testosterone, urinary incontinence, and UTIs had COVID peaks. BPH had peaks for both pre-COVID and COVID time periods.

Urologic condition	Top queried states (SVI)	Most populated states (SVI)	Rising queries	Top queries (SVI)
	Florida (100)	California (76)	"Does an enlarged prostate affect a man sexually"	"Prostate" (100)
	Arizona (95)	Texas (73)	"Rezum treatment for BPH"	"BPH" (93)
Benign prostatic hyperplasia	Connecticut (92)	Florida (100)	"Does ejaculation help enlarged prostate"	"Enlarged prostate" (77)
	Mississippi (91)	New York (90)	"Can an enlarged prostate cause ED"	"Prostatic" (23)
	Tennessee (91)	Pennsylvania (90)	"Urolift procedure"	"Benign" (21)
	Maine (100)	California (44)	"Gemcitabine for bladder cancer"	"Symptoms" (100)
	New York (91)	Texas (44)	"Bladder cancer survival rates by age"	"Bladder cancer symptoms"

				(100)
Bladder cancer	Vermont (86)	Florida (59)	"What are the signs of bladder cancer"	"Symptoms of bladder cancer" (46)
	Connecticut (84)	New York (91)	"Is bladder cancer treatable"	"Bladder cancer treatment" (44)
	New Hampshire (82)	Pennsylvania (69)	"TURBT bladder cancer"	"Bladder cancer signs" (38)
	Louisiana (100)	California (57)	"Erectile dysfunction covid"	"Is erectile dysfunction" (100)
	West Virginia (93)	Texas (68)	"Covid 19 erectile dysfunction"	"ED" (61)
Erectile dysfunction	Mississippi (90)	Florida (71)	"Coronavirus erectile dysfunction"	"Erectile dysfunction causes" (60)
	Kentucky (87)	New York (66)	"Curved erectile dysfunction"	"Erectile dysfunction help" (54)
	South Carolina (87)	Pennsylvania (71)	"Covid and erectile dysfunction"	"What is erectile dysfunction" (54)
	West Virginia (100)	California (65)	"Covid blood in urine"	"Blood urine" (100)
	Mississippi (97)	Texas (72)	"Microscopic hematuria in females"	"Blood in urine" (92)
Hematuria	New Mexico (94)	Florida (85)	"Blood in urine prostate cancer survivor"	"Hematuria" (42)
	North Dakota (93)	New York (73)	"What does blood in the urine indicate"	"Blood in urine cause" (9)
	Louisiana (93)	Pennsylvania (86)	"Nitrofurantoin"	"UTI" (9)
	South Dakota (100)	California (55)	"Interstitial cystitis association"	"Cystitis" (100)
	Tennessee (82)	Texas (54)	"Chronic cystitis ICD-10"	"Interstitial cystitis" (97)
Interstitial cystitis	Kentucky (81)	Florida (69)	"Pelvic floor dysfunction"	"Interstitial" (93)
	Wyoming (77)	New York (48)	"Bladder pain relief"	"Bladder" (50)
	Oklahoma (74)	Pennsylvania (82)	"Appendicitis"	"Bladder pain" (40)
	West Virginia (100)	California (45)	"Stage 5 kidney cancer"	"Kidney" (100)
	Vermont (94)	Texas (59)	"History of kidney cancer ICD-10"	"Kidney cancer" (93)
Kidney cancer	New York (85)	Florida (63)	"Kidney cancer treatment options"	"Kidney cancer symptoms" (22)
	Wyoming (82)	New York (85)	"Is kidney cancer genetic"	"Symptoms" (22)
	Pennsylvania (73)	Pennsylvania (73)	"History of renal cancer ICD-10"	"Renal cancer" (18)
	West Virginia (100)	California (52)	"Stages of passing a kidney stone"	"Kidney" (100)
	Kentucky (90)	Texas (63)	"How to pass a kidney stone at home"	"Kidney stones" (68)
Kidney stones	Tennessee (89)	Florida (68)	"How to pass a kidney stone in 24 hours"	"Kidney stone" (41)
Runey stones				
Nulley stolles	Alabama (84)	New York (58)	"Best way to pass a kidney stone"	"Kidney pain" (12)
Ridney stores		New York (58) Pennsylvania (76)		"Kidney pain" (12) "Symptoms" (10)
	Alabama (84)		"Best way to pass a kidney stone"	
	Alabama (84) Oklahoma (80)	Pennsylvania (76)	"Best way to pass a kidney stone" "What causes kidney stones"	"Symptoms" (10) "Low testosterone men"

(100)

				symptoms" (89)
	Mississippi (88)	New York (48)	"How can you tell if you have low testosterone"	"Low testosterone in men" (72)
	Tennessee (87)	Pennsylvania (50)	"How do you know if your testosterone is low"	"Can low testosterone" (64)
	South Dakota (100)	California (46)	"Frequent urination causes"	"Overactive bladder" (100)
	Arkansas (86)	Texas (53)	"What is an overactive bladder"	"OAB" (33)
Overactive bladder	Mississippi (86)	Florida (60)	"OAB Treatment"	"ICD-10 overactive bladder" (8)
	Delaware (84)	New York (72)	"Signs of overactive bladder"	"Overactive bladder symptoms" (7)
	Nebraska (83)	Pennsylvania (68)	"Overactive kidneys"	"Overactive bladder medication" 97)
	New York (100)	California (69)	"What percent of men get prostate cancer"	"Prostate" (100)
	Kansas (90)	Texas (68)	"Encounter for chemotherapy for prostate cancer"	"Cancer" (93)
Prostate cancer	Florida (86)	Florida (86)	"Cyberknife for prostate cancer locations"	"Prostate cancer" (87)
	New Jersey (85)	New York (100)	"Does masturbation cause prostate cancer"	"PSA" (11)
	Pennsylvania (84)	Pennsylvania (84)	"When should men get a prostate exam"	"Symptoms" (9)
	New Hampshire (100)	California (71)	"Best incontinence underwear for women"	"Incontinence" (100)
	West Virginia (98)	Texas (72)	"Attain for incontinence"	"Bladder" (24)
Urinary incontinence	Vermont (92)	Florida (80)	"Attain incontinence device"	"Urinary incontinence" (20)
	Alabama (91)	New York (90)	"Incontinence supplies near me"	"Bladder control" (14)
	Mississippi (90)	Pennsylvania (84)	"Bladder control underwear"	"Incontinence pads" (7)
	Mississippi (100)	California (71)	"Does doxycycline treat UTI"	"UTI" (100)
	West Virginia (100)	Texas (78)	"What causes UTIs in women"	"Symptoms" (18)
Urinary tract infections	Alabama (96)	Florida (79)	"Can boys get UTIs"	"Symptoms UTI" (15)
	Arkansas (90)	New York (65)	"Can UTI affect your period"	"Urinary tract" (12)
	Tennessee (89)	Pennsylvania (78)	"Best antibiotic for UTI"	"Bladder infection" (11)

TABLE 1: Google Trends overview of urologic conditions from October 2018 to August 2021

SVI: search volume index; BPH: benign prostatic hyperplasia; COVID: coronavirus disease; TURBT: transurethral resection of bladder tumor; ED: erectile dysfunction; UTI: urinary tract infection; ICD: International Classification of Diseases; OAB: overactive bladder; PSA: prostate-specific antigen

During the COVID period in the USA, median SVI was significantly higher for erectile dysfunction (p=0.04) and lower for bladder cancer (p<0.01), hematuria (p<0.01), kidney cancer (p<0.01), kidney stones (p=0.03), and prostate cancer (p<0.01) (Table 2). Significant negative correlations to COVID searches were identified for bladder cancer (R_S =-0.36, p<0.01), hematuria (R_S =-0.31, p<0.01), OAB (R_S =-0.23, p=0.04), and prostate cancer (R_S =-0.37, p<0.01) and a significant positive correlation to COVID searches was present for ED (R_S =0.20, p=0.04) (Table 3 and Figure 1). Data comparing median SVIs of pre-COVD to COVID and Spearman's correlations of COVID search terms to disease-specific terms for the top five populated and top five queried states is found in the Appendix.

			_
Urologic condition	Pre-COVID; median (IQR)	COVID; median (IQR)	Р
Benign prostatic hyperplasia	82.0 (11.0)	82.0 (14.0)	0.87
Bladder cancer *	76.0 (11.0)	69.0 (13.5)	<0.01
Erectile dysfunction *	48.0 (7.0)	51.0 (8.5)	0.04
Hematuria *	83.0 (8.0)	74.0 (11.5)	<0.01
Interstitial cystitis	73.0 (13.0)	70.0 (14.5)	0.12
Kidney cancer *	48.0 (10.0)	41.0 (13.5)	<0.01
Kidney stones *	85.0 (7.0)	83.0 (8.0)	0.03
Low testosterone	70.0 (13.0)	69.0 (18.0)	0.66
Overactive bladder	69.0 (20.0)	69.0 (17.0)	0.93
Prostate cancer *	85.0 (8.0)	80.0 (15.5)	<0.01
Urinary incontinence	73.0 (6.0)	76.0 (16.5)	0.23
Urinary tract infections	86.0 (5.0)	85.0 (6.5)	0.06

TABLE 2: Comparison of Median Search Volume Index of Urologic Conditions Pre-COVID and during COVID in the United States.

* Indicates p<0.05

Urologic Condition	R _S	Ρ
Benign prostatic hyperplasia	-0.18	0.12
Bladder cancer *	-0.36	<0.01
Erectile dysfunction *	0.20	0.04
Hematuria *	-0.31	<0.01
Interstitial cystitis	-0.21	0.07
Kidney cancer	-0.10	0.40
Kidney stones	-0.19	0.11
Low testosterone	-0.21	0.08
Overactive bladder *	-0.23	0.04
Prostate cancer *	-0.33	<0.01
Urinary incontinence	-0.22	0.05
Urinary tract infections	0.02	0.91

TABLE 3: Correlation of urologic condition searches to COVID-19 related searches during COVID in the United States

* Indicates p<0.05

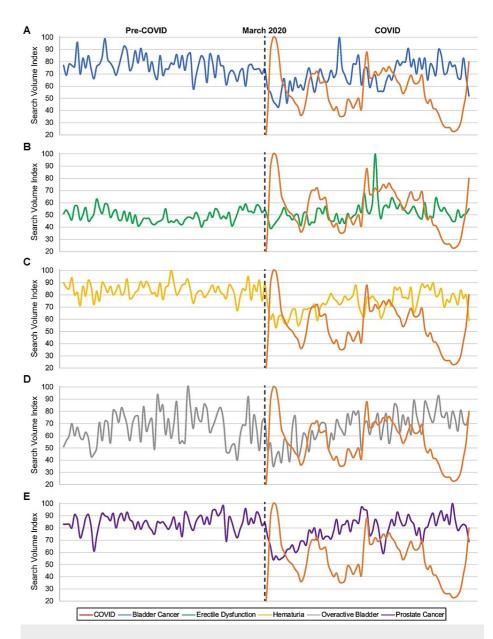


FIGURE 1: Online interest in urologic conditions showing significant correlation with COVID-19 related searches

Urologic conditions showing significant correlation with COVID-19 related searches include (A) bladder cancer, (B) erectile dysfunction, (C) hematuria, (D) overactive bladder, and (E) prostate cancer.

Discussion

Online search engine trends, specifically Google Trends, have proven useful indicators of shifts in the public's interest in healthcare-related topics and how they correlate with major events [15,22]. For example, in 2019, Rezaee et al. [16] determined differences in online interest in prostate cancer diagnosis, screening, and treatments before and after different USPSTF guidelines were released for prostate cancer. With the COVID-19 pandemic becoming mainstream in the United States in March 2020 [20], the landscape of all medical fields, including urology, was significantly impacted. To our knowledge, this study is the first to provide a robust analysis of Google Trends data to analyze the impact of COVID-19 on the most common urologic conditions.

By analyzing Google Trends data, we saw that the most populated states were not the states with the highest search interest proportional to population, and many of the top five by proportion states overlapped between conditions. For example, states like Mississippi (seven), West Virginia (five), and Tennessee (five) were listed as the top five states for at least five of the conditions we queried. There are many potential factors that could influence increased public interest in urologic conditions. There may be a higher disease prevalence in these states, thus driving more online interest in these conditions. Similarly, interest in

associated urologic and non-urologic conditions within the state can play a role; states with a higher prevalence of cardiovascular disease may have higher searches related to ED [23]. It could also be related to the locations of academic centers or hospitals that focus heavily on these urologic conditions and therefore drive more interest in those geographical areas. Major academic hospitals tend to be clustered in the most populated states [24]; this is reflected by more overlap of the most populated states with the top states for search interest in urologic cancers, which often may require patients to visit these major academic centers. Nevertheless, further exploration into what drove online interest in urologic conditions in these areas is warranted.

Google Trends also provided us with data on the top queries and rising queries related to the conditions, providing insight into public interest in these conditions. Specifically, treatments were a part of rising or top queries for nine of the twelve conditions, including all three malignant conditions. Symptoms were also a large focus for most of the searches. Importantly for this study, there were two conditions that had rising queries related to coronavirus: ED and hematuria. ED specifically had a strong correlation with rising queries and COVID-19, with four out of the top five rising queries being related to COVID; this was likely due to research suggesting links between the two conditions or a spread of misinformation on the internet [12]. Similarly, hematuria and COVID are linked through potential mechanisms of acute kidney injury and could explain the rising COVID-related queries for the condition [25].

Online interest in most urologic conditions (especially bladder cancer, hematuria, kidney cancer, kidney stones, OAB, and prostate cancer) marked by lower median SVIs during COVID or a negative correlation to COVID related searches was noted to decrease in the COVID time period compared to the pre-COVID period at the national and state level. These decreases likely are the result of patients not being adequately diagnosed during this time period, as people were avoiding doctors' offices and public settings during the height of the pandemic in the hopes of avoiding infection [26,27]. Due to a lack of diagnosis regardless of the maintained prevalence, public interest in many urologic conditions was seen to decrease, marked by the decreasing online interest. Unfortunately, this time period could have led to a proportion of these would-be patients to have progressed in their respective diseases, making this clinically noteworthy. The only condition to show significantly increased online interest during the pandemic was erectile dysfunction. This suggests a link between ED and COVID in the public's viewpoint, potentially stemming from research indicating links between the conditions [12,28], a spread of misinformation linking COVID or vaccines to ED [29], or a mix of the two.

Graphical representations of urologic condition searches showing significant correlations to COVID-19 searches demonstrate a trend in which searches for COVID-19 peak while the searches for the urological conditions downtrend (with the exception of ED) (Figure 1). This fluctuation of COVID-19 searches could be related to "waves" of COVID-19 throughout the United States or significant developments in treatment or vaccination news [20]. This decreased interest in most urologic conditions, especially cancers like bladder and prostate cancer, during these waves likely exacerbated delays in diagnosing and treating these conditions, the impact of which may be experienced by the urology community as things return to normal [26]. Further analysis into the specific timing of these peak searches could provide more insight into factors that changed public interest.

There are important limitations to this study. Firstly, this research paper did not analyze searches on any other online search databases (e.g., Yahoo, Bing) or analyze searches on any social media websites (e.g., Twitter, Facebook), potentially leading to a lack of trends that were present in alternate search engines. Furthermore, it is difficult to distinguish search interests by subgroups (e.g., potential patients, doctors, students), and therefore associations noted may be diminished or supplemented. This is a descriptive study, and the findings do not imply causation, especially because there is a lack of clinical data. Clinical data, if available, could help supplement findings; nevertheless, we included analysis on many months of data across the USA to strengthen findings. A lack of analysis into international trends may also make it difficult to apply the findings to other countries. However, a lack of access to the internet in various countries would add in additional confounders that would diminish trends noted.

Conclusions

In conclusion, online interest in bladder cancer, hematuria, kidney cancer, kidney stones, OAB, and prostate cancer decreased during COVID compared to the pre-COVID time period. The decreased interest in these conditions meant that focus was shifted away from these conditions, potentially leading to delays in diagnosis and treatment; the impact of the delays may be felt by the urology community in the coming months as things return to normal. Erectile dysfunction was the only condition to show an increased online interest, potentially due to research linking it to COVID-19 or the spread of misinformation linking it to COVID-associated factors like vaccines.

Appendices

Tables 4 provides data comparing median search volume index (SVI) between Pre-COVID and during COVID in the top five queried and top five most populated states for urologic conditions. Table 5 provides data on the correlation of urologic condition searches to COVID-19 related searches during COVID in the top five

queried and top five most populated states.

Jrologic condition	Location	Pre-COVID; median (IQR)	COVID; median (IQR)	Р
	Top queried states	:		
	Florida	54.0 (21.0)	52.0 (19.0)	0.85
	Arizona	31.0 (21.0)	23.0 (22.5)	0.06
	Connecticut	29.0 (18.0)	27.0 (24.0)	0.31
	Mississippi	30.0 (37.0)	29.0 (33.0)	0.65
	Tennessee	35.0 (22.0)	30.0 (22.5)	0.10
Benign prostatic hyperplasia	Most populated sta	tes:		
	California	59.0 (17.0)	59.0 (23.5)	0.69
	Texas *	55.0 (24.0)	61.0 (25.0)	0.04
	Florida	54.0 (21.0)	52.0 (19.0)	0.85
	New York	61.0 (33.0)	62.0 (21.0)	0.85
	Pennsylvania	40.0 (30.0)	41.0 (23.5)	0.73
	Top queried states	:		
	Maine	23.0 (33.0)	22.5 (32.0)	0.66
	New York	54.0 (21.0)	55.0 (19.5)	0.73
	Vermont	12.0 (32.0)	9.0 (35.0)	0.07
	Connecticut	14.0 (15.0)	13.0 (26.0)	0.29
laddar aanaar	New Hampshire	10.0 (19.0)	10.0 (18.0)	0.95
ladder cancer	Most populated sta	tes:		
	California	50.0 (19.0)	45.0 (22.5)	0.08
	Texas *	49.0 (21.0)	44.0 (18.0)	0.01
	Florida	53.0 (28.0)	51.0 (24.5)	0.21
	New York	54.0 (21.0)	55.0 (19.5)	0.73
	Pennsylvania	46.0 (30.0)	37.0 (19.5)	0.06
	Top queried states	:		
	Louisiana	25.0 (29.0)	22.0 (24.0)	0.08
	West Virginia *	25.0 (21.0)	29.0 (14.0)	< 0.0
	Mississippi *	19.0 (23.0)	26.0 (16.0)	< 0.0
	Kentucky	30.0 (30.0)	32.0 (34.5)	0.20
rectile dysfunction	South Carolina	32.0 (32.0)	30.0 (29.0)	0.29
	Most populated sta	tes:		
	California	50.0 (12.0)	49.0 (10.5)	0.42
	Texas *	41.0 (11.0)	46.0 (11.0)	< 0.0
	Florida *	50.0 (12.0)	55.0 (14.5)	0.03
	New York	58.0 (21.0)	55.0 (17.5)	0.71
	Pennsylvania	33.0 (19.0)	31.0 (19.0)	0.38

	West Virginia *	22.0 (20.0)	18.0 (29.0)	0.04
	Mississippi	15.0 (35.0)	13.0 (14.5)	0.13
	New Mexico	17.0 (32.0)	15.0 (28.0)	0.06
	North Dakota	15.5 (37.0)	14.0 (32.0)	0.01
	Louisiana	30.0 (27.0)	22.0 (25.5)	0.12
Hematuria	Most populated st		- ()	
	California	47.0 (29.0)	47.0 (28.0)	0.46
	Texas *	56.0 (16.0)	46.0 (18.5)	<0.01
	Florida *	62.0 (22.0)	55.0 (15.5)	<0.01
	New York *	64.0 (20.0)	56.0 (24.0)	<0.01
	Pennsylvania	42.0 (19.0)	41.0 (23.0)	0.79
	Top queried state		()	
	South Dakota	9.0 (17.0)	11.0 (19.0)	0.58
	Tennessee	41.0 (40.0)	36.0 (37.0)	0.05
	Kentucky	23.0 (39.0)	22.0 (40.5)	0.00
	Wyoming	4.0 (15.5)	9.0 (22.5)	0.43
	Oklahoma	24.0 (27.0)	21.0 (25.5)	0.31
Interstitial cystitis	Most populated st		21.0 (20.0)	0.01
	California		38.0 (22.5)	0.75
	Texas	37.0 (19.0) 35.0 (27.0)	38.0 (22.5) 33.0 (22.5)	0.75
	Florida			
	New York *	44.0 (26.0)	38.0 (27.0)	0.73
		36.0 (23.0)	32.0 (24.5)	
	Pennsylvania	38.0 (26.0)	33.0 (25.0)	0.10
	Top queried state			
	West Virginia	14.0 (31.0)	9.0 (24.5)	0.07
	Vermont	13.0 (31.0)	12.0 (22.5)	0.83
	New York *	40.0 (20.0)	35.0 (17.5)	<0.01
	Wyoming	6.5 (19.0)	5.0 (14.5)	0.81
Kidney cancer	Pennsylvania	35.0 (23.0)	33.0 (26.0)	0.65
	Most populated st			
	California *	54.0 (35.0)	41.0 (23.5)	<0.01
	Texas *	37.0 (20.0)	31.0 (20.0)	0.04
	Florida	37.0 (20.0)	35.0 (22.5)	0.60
	New York *	40.0 (20.0)	35.0 (17.5)	<0.01
	Pennsylvania	35.0 (23.0)	33.0 (26.0)	0.65
	Top queried state	s:		
	West Virginia	43.0 (29.0)	39.0 (24.5)	0.52
	Kentucky *	50.0 (18.0)	43.0 (20.5)	<0.01
	Tennessee *	58.0 (22.0)	53.0 (21.5)	0.02
	Alabama	58.0 (25.0)	56.0 (22.5)	0.23

Kidney stones	Oklahoma *	46.0 (22.0)	38.0 (22.5)	0.04
Kidney stones	Most populated st	ates:		
	California	72.0 (13.0)	73.0 (12.0)	0.65
	Texas *	73.0 (13.0)	68.0 (14.0)	<0.01
	Florida *	69.0 (12.0)	65.0 (14.5)	0.02
	New York	72.0 (18.0)	69.0 (17.5)	0.10
	Pennsylvania *	65.0 (14.0)	58.0 (17.0)	0.03
	Top queried state	s:		
	Wyoming *	12.0 (23.5)	4.0 (16.0)	0.01
	Alabama	30.0 (21.0)	28.0 (32.0)	0.88
	Oklahoma	14.0 (27.0)	12.0 (24.0)	0.06
	Mississippi	14.0 (21.0)	13.0 (15.0)	0.09
	Tennessee	28.0 (18.0)	32.0 (19.0)	0.62
Low testosterone	Most populated st	ates:		
	California	34.0 (14.0)	38.0 (20.0)	0.64
	Texas	54.0 (20.0)	54.0 (27.0)	0.65
	Florida	41.0 (24.0)	38.0 (22.5)	0.32
	New York	39.0 (21.0)	43.0 (29.0)	0.93
	Pennsylvania	36.0 (29.0)	38.0 (29.5)	0.70
	Top queried state	s:		
	South Dakota	13.5 (33.0)	7.5 (23.0)	0.22
	Arkansas	19.0 (30.0)	13.5 (22.5)	0.20
	Mississippi	10.0 (21.0)	18.5 (26.0)	0.05
	Delaware	3.0 (12.5)	6.0 (18.5)	0.20
	Nebraska	13.5 (25.0)	19.0 (30.0)	0.34
Overactive bladder	Most populated st	ates:		
	California	40.0 (27.0)	40.0 (20.5)	0.95
	Texas	35.0 (29.0)	35.0 (19.5)	0.56
	Florida	40.0 (26.0)	26.0 (26.5)	0.26
	New York	34.0 (29.0)	29.0 (22.5)	0.88
	Pennsylvania	35.0 (22.0)	35.0 (37.5)	0.90
	Top queried state	s:		
	New York	64.0 (18.0)	62.0 (16.5)	0.25
	Kansas *	32.0 (22.0)	39.0 (16.0)	0.01
	Florida *	64.0 (16.0)	57.0 (21.0)	<0.01
	New Jersey	63.0 (20.0)	58.0 (22.5)	0.06
	Pennsylvania	54.0 (20.0)	54.0 (25.0)	0.66
Prostate cancer	Most populated st	ates:		
	California *	71.0 (12.0)	61.0 (14.0)	<0.01

	Texas *	60.0 (16.0)	53.0 (15.0)	<0.01
	Florida *	64.0 (16.0)	57.0 (21.0)	<0.01
	New York	64.0 (18.0)	62.0 (16.5)	0.25
	Pennsylvania	54.0 (20.0)	54.0 (25.0)	0.66
	Top queried states	3:		
	New Hampshire	19.0 (38.0)	16.0 (31.5)	0.11
	West Virginia	29.0 (54.0)	25.0 (49.5)	0.43
	Vermont	23.0 (28.0)	25.0 (31.0)	0.10
	Alabama	34.0 (29.0)	30.0 (27.5)	0.34
Jrinary incontinence	Mississippi	18.0 (37.0)	28.0 (25.5)	0.71
onnary incontinence	Most populated st	ates:		
	California	64.0 (15.0)	63.0 (14.5)	0.97
	Texas	58.0 (21.0)	58.0 (20.5)	0.96
	Florida *	57.0 (16.0)	59.0 (16.5)	0.04
	New York	50.0 (19.0)	53.0 (25.0)	0.89
	Pennsylvania	46.0 (16.0)	42.0 (22.5)	0.41
	Top queried states	5:		
Urinary tract infections	Mississippi *	59.0 (20.0)	50.0 (22.0)	<0.01
	West Virginia	40.0 (18.0)	41.0 (19.5)	0.87
	Alabama *	76.0 (16.0)	70.0 (17.5)	0.04
	Arkansas	55.0 (17.0)	56.0 (14.5)	0.98
	Tennessee	66.0 (15.0)	66.0 (13.0)	0.46
	Most populated st	ates:		
	California	81.0 (10.0)	81.0 (10.5)	0.82
	Texas	80.0 (9.0)	77.0 (9.0)	0.06
	Florida	81.0 (8.0)	79.0 (10.0)	0.05
	New York	78.0 (10.0)	75.0 (13.0)	0.07
	Pennsylvania *	76.0 (12.0)	71.0 (13.0)	<0.01

TABLE 4: Comparison of median search volume index of urologic conditions pre-COVID and during COVID in top queried and most populated states

* Indicates p<0.05

logic condition	Location	R _S	Р
	Top queried states:		
	Florida	-0.22	0.06
	Arizona	-0.02	0.85
	Connecticut	-0.06	0.61
	Mississippi	0.17	0.15

Benign prostatic hyperplasia Most populated states: California 0.04 0.75 Texas -0.20 0.09 Florida -0.22 0.06 New York 0.07 0.53 Pennsylvania -0.12 0.29 Top queried states: 0.02 0.86 New York -0.02 0.86 New York -0.02 0.86 New York -0.10 0.40 Vermont -0.10 0.40 Vermont 0.16 0.17 Connecticut -0.19 0.11 New Hampshire -0.10 0.42 Most populated states: -0.10 0.42 Zalifornia* -0.29 0.01 Texas* -0.25 0.04	-0.04 0.76	Tennessee	
Texas-0.200.09Florida-0.220.06New York0.070.53Pennsylvania-0.120.29Top queried states:-Maine-0.020.86New York-0.100.40Vermont0.160.17Connecticut-0.190.11New Hampshire-0.100.42Most populated states:Zelifornia *Output-0.100.42New Hampshire-0.100.42Not populated states:California *0.020.01		Most populated states:	Benign prostatic hyperplasia
Forial -0.22 0.06 New York 0.07 0.53 Pennsylvania 0.12 0.29 Top queried states: 0.02 0.86 New York 0.02 0.86 New York 0.10 0.40 Yermont 0.10 0.40 Yermont 0.16 0.17 Connecticut 0.19 0.11 New Hampshire 0.10 0.42 Moter populated states: 0.10 0.42 Connecticut 0.10 0.42 New Hampshire 0.10 0.42 Moter populated states: 0.10 0.42	0.04 0.75	California	
New York0.070.53Pennsylvania-0.120.29Top queried states:-0.200.86Maine-0.020.86New York0.100.40Vermont0.160.17Connecticut-0.190.11New Hampshire-0.100.42Hatop pulated states:-0.100.42Colfornia *-0.290.01	-0.20 0.09	Texas	
Pennsylvania0.120.29Top queried states:Maine-0.020.86New York-0.100.40Vermont0.160.17Connecticut-0.190.11New Hampshire-0.100.42Most populated states:	-0.22 0.06	Florida	
Top queried states: Maine -0.02 0.86 New York -0.10 0.40 Vermont 0.16 0.17 Connecticut -0.19 0.14 New Hampshire -0.10 0.42 Most populated states: - - California * - 0.29 0.01	0.07 0.53	New York	
Maine -0.02 0.86 New York -0.10 0.40 Vermont 0.16 0.17 Connecticut -0.19 0.11 New Hampshire -0.10 0.42 Motion pulated states:	-0.12 0.29	Pennsylvania	
New York -0.10 0.40 Vermont 0.16 0.17 Connecticut -0.19 0.11 New Hampshire -0.10 0.42 Most populated states: - - California * - 0.29 0.01		Top queried states:	
Vermont 0.16 0.17 Connecticut -0.19 0.11 New Hampshire -0.10 0.42 Most populated states: - - California * - 0.29 0.01	-0.02 0.86	Maine	
Connecticut -0.19 0.11 New Hampshire -0.10 0.42 Most populated states: - - California * - 0.29 0.01	-0.10 0.40	New York	
Bladder cancer New Hampshire -0.10 0.42 Most populated states: -0.29 0.01	0.16 0.17	Vermont	
Bladder cancer Most populated states: California * -0.29 0.01	-0.19 0.11	Connecticut	
Most populated states: California * -0.29 0.01	-0.10 0.42	New Hampshire	51.44
		Most populated states:	Bladder cancer
Texas * -0.25 0.04	-0.29 0.01	California *	
	-0.25 0.04	Texas *	
Florida -0.11 0.33	-0.11 0.33	Florida	
New York -0.10 0.40	-0.10 0.40	New York	
Pennsylvania 0.08 0.50	0.08 0.50	Pennsylvania	
Top queried states:		Top queried states:	
Louisiana -0.06 0.63	-0.06 0.63	Louisiana	
West Virginia -0.18 0.12	-0.18 0.12	West Virginia	
Mississippi 0.04 0.75	0.04 0.75	Mississippi	
Kentucky -0.03 0.80	-0.03 0.80	Kentucky	
South Carolina 0.17 0.15	0.17 0.15	South Carolina	
Erectile dysfunction Most populated states:		Most populated states:	Erectile dystunction
California 0.10 0.94	0.10 0.94	California	
Texas 0.06 0.60	0.06 0.60	Texas	
Florida * 0.22 0.04	0.22 0.04	Florida *	
New York 0.13 0.26	0.13 0.26	New York	
Pennsylvania 0.12 0.30	0.12 0.30	Pennsylvania	
Top queried states:		Top queried states:	
West Virginia -0.18 0.12	-0.18 0.12	West Virginia	
Mississippi -0.15 0.19	-0.15 0.19	Mississippi	
New Mexico 0.16 0.16	0.16 0.16	New Mexico	
North Dakota -0.15 0.22	-0.15 0.22	North Dakota	
Louisiana -0.22 0.05	-0.22 0.05	Louisiana	
Hematuria Most populated states:		Most populated states:	Hematuria
California -0.07 0.56	-0.07 0.56	California	
Texas -0.10 0.40	-0.10 0.40	Texas	

	Florida	0.09	0.45
	New York	0.02	0.84
	Pennsylvania	-0.05	0.68
	Top queried states:		
	South Dakota	-0.09	0.43
	Tennessee	0.04	0.84
	Kentucky	0.09	0.45
	Wyoming	-0.04	0.73
	Oklahoma	-0.13	0.27
rstitial cystitis	Most populated states:		
	California	0.07	0.55
	Texas	0.04	0.71
	Florida	-0.04	0.76
	New York	0.15	0.21
	Pennsylvania	0.13	0.25
	Top queried states:		
	West Virginia	-0.03	0.80
	Vermont	0.14	0.22
	New York	0.13	0.28
	Wyoming	0.07	0.57
cancer	Pennsylvania	0.06	0.60
	Most populated states:		
	California	0.07	0.96
	Texas	0.11	0.36
	Florida	-0.08	0.52
	New York	0.13	0.28
	Pennsylvania	0.06	0.60
	Top queried states:		
	West Virginia *	-0.26	0.03
	Kentucky	-0.22	0.06
	Tennessee	-0.06	0.62
	Alabama	-0.04	0.74
ones	Oklahoma	-0.12	0.33
	Most populated states:		
	California	-0.16	0.18
		0.10	0.38
	Texas	0110	
	Texas Florida	-0.01	0.94

	Top queried states:		
Low testosterone	Wyoming	-0.05	0.87
	Alabama	-0.22	0.07
	Oklahoma	-0.03	0.80
	Mississippi	-0.04	0.77
	Tennessee	-0.11	0.37
	Most populated states:		
	California	-0.19	0.10
	Texas	-0.02	0.88
	Florida	-0.24	0.04
	New York	0.06	0.64
	Pennsylvania	-0.08	0.48
	Top queried states:		
	South Dakota	0.02	0.89
	Arkansas	0.05	0.86
	Mississippi	0.07	0.55
Overactive bladder	Delaware	-0.05	0.66
	Nebraska	0.11	0.34
	Most populated states:		
	California *	0.23	0.04
	Texas	-0.08	0.49
	Florida	0.06	0.58
	New York	-0.13	0.28
	Pennsylvania *	-0.24	0.04
Prostate cancer	Top queried states:		
	New York	-0.16	0.18
	Kansas	-0.19	0.11
	Florida *	-0.41	<0.01
	New Jersey	-0.17	0.15
	Pennsylvania *	-0.27	0.02
	Most populated states:		
	California *	-0.25	0.03
	Texas	-0.07	0.54
	Florida *	-0.41	<0.01
	New York	-0.16	0.18
	Pennsylvania *	-0.27	0.02
	Top queried states:		
	New Hampshire	-0.07	0.57
	West Virginia	0.09	0.46
	Vermont	0.07	0.55

Urinary incontinence	Alabama	-0.12	0.32
	Mississippi	0.01	0.98
	Most populated states:		
	California	0.07	0.95
	Texas	-0.15	0.21
	Florida	0.04	0.98
	New York	0.02	0.89
	Pennsylvania	-0.18	0.13
Urinary tract infections	Top queried states:		
	Mississippi	0.04	0.74
	West Virginia	-0.03	0.82
	Alabama	-0.04	0.75
	Arkansas	0.04	0.73
	Tennessee	0.04	0.75
	Most populated states:		
	California	-0.06	0.61
	Texas	0.08	0.49
	Florida	0.06	0.60
	New York	-0.06	0.64
	Pennsylvania	-0.14	0.22

TABLE 5: Correlation of urologic condition searches to COVID-19 related searches during COVID in top queried and most populated states

* Indicates p<0.05

Additional Information

Disclosures

Human subjects: All authors have confirmed that this study did not involve human participants or tissue. Animal subjects: All authors have confirmed that this study did not involve animal subjects or tissue. Conflicts of interest: In compliance with the ICMJE uniform disclosure form, all authors declare the following: Payment/services info: All authors have declared that no financial support was received from any organization for the submitted work. Financial relationships: All authors have declared that they have no financial relationships at present or within the previous three years with any organizations that might have an interest in the submitted work. Other relationships: All authors have declared that there are no other relationships or activities that could appear to have influenced the submitted work.

References

- De' R, Pandey N, Pal A: Impact of digital surge during Covid-19 pandemic: a viewpoint on research and practice. Int J Inf Manage. 2020, 55:102171. 10.1016/j.ijinfomgt.2020.102171
- Bento AI, Nguyen T, Wing C, Lozano-Rojas F, Ahn YY, Simon K: Evidence from internet search data shows information-seeking responses to news of local COVID-19 cases. Proc Natl Acad Sci USA. 2020, 117:11220-2. 10.1073/pnas.2005335117
- Effenberger M, Kronbichler A, Shin JI, Mayer G, Tilg H, Perco P: Association of the COVID-19 pandemic with internet search volumes: a Google Trends[™] analysis. Int J Infect Dis. 2020, 95:192-7. 10.1016/j.ijid.2020.04.033
- 4. Google Trends: trends help. (2021). Accessed: November 5, 2021: http://support.google.com/trends.
- 5. Search engine market share united states of America . (2021). Accessed: November 5, 2021: https://gs.statcounter.com/search-engine-market-share/all/united-states-of-america.
- 6. Willard SD, Nguyen MM: Internet search trends analysis tools can provide real-time data on kidney stone

disease in the United States. Urology. 2013, 81:37-42. 10.1016/j.urology.2011.04.024

- Hesse BW, Nelson DE, Kreps GL, Croyle RT, Arora NK, Rimer BK, Viswanath K: Trust and sources of health information: the impact of the Internet and its implications for health care providers: findings from the first Health Information National Trends Survey. Arch Intern Med. 2005, 165:2618-24.
 10.1001/archinte.165.22.2618
- Pautler SE, Tan JK, Dugas GR, Pus N, Ferri M, Hardie WR, Chin JL: Use of the internet for self-education by patients with prostate cancer. Urology. 2001, 57:230-3. 10.1016/s0090-4295(00)01012-8
- 9. Lelie-van der Zande R, Koster ES, Teichert M, Bouvy ML: Womens' self-management skills for prevention and treatment of recurring urinary tract infection. Int J Clin Pract. 2021, 75:e14289. 10.1111/ijcp.14289
- 10. Dasgupta P: Covid-19 and urology. BJU Int. 2020, 125:749. 10.1111/bju.15104
- 11. Aitken RJ: COVID-19 and human spermatozoa potential risks for infertility and sexual transmission? . Andrology. 2021, 9:48-52. 10.1111/andr.12859
- Sansone A, Mollaioli D, Ciocca G, Limoncin E, Colonnello E, Vena W, Jannini EA: Addressing male sexual and reproductive health in the wake of COVID-19 outbreak. J Endocrinol Invest. 2021, 44:223-31. 10.1007/s40618-020-01350-1
- Black PC, Penson DF: Prostate cancer on the internet--information or misinformation? J Urol. 2006, 175:1836-42. 10.1016/S0022-5347(05)00996-1
- Eysenbach G: Infodemiology and infoveillance: framework for an emerging set of public health informatics methods to analyze search, communication and publication behavior on the Internet. J Med Internet Res. 2009, 11:e11. 10.2196/jmir.1157
- 15. Dreher PC, Tong C, Ghiraldi E, Friedlander JI: Use of Google Trends to track online behavior and interest in kidney stone surgery. Urology. 2018, 121:74-8. 10.1016/j.urology.2018.05.040
- 16. Rezaee ME, Goddard B, Sverrisson EF, Seigne JD, Dagrosa LM: 'Dr Google': trends in online interest in prostate cancer screening, diagnosis and treatment. BJU Int. 2019, 124:629-34. 10.1111/bju.14846
- 17. Feinstein L, Matlaga B: Urologic diseases in America. US Government Printing Office, Washington, DC; 2018.
- Urology Care Foundation: common conditions. (2021). Accessed: November 5, 2021: https://www.urologyhealth.org/urology-a-z/all-conditions.
- WHO director-general's opening remarks at the media briefing on COVID-19. (2020). Accessed: November 5, 2021: https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarksat-the-media-briefing-on-....
- Moreland A, Herlihy C, Tynan MA, et al.: Timing of state and territorial COVID-19 stay-at-home orders and changes in population movement - United States, March 1-May 31, 2020. MMWR Morb Mortal Wkly Rep. 2020, 69:1198-203. 10.15585/mmwr.mm6935a2
- 21. U.S. and world population clock (2021). Accessed: November 5 . (2021). https://www.census.gov/popclock/.
- Ginsberg J, Mohebbi MH, Patel RS, Brammer L, Smolinski MS, Brilliant L: Detecting influenza epidemics using search engine query data. Nature. 2009, 457:1012-4. 10.1038/nature07634
- 23. Shamloul R, Ghanem H: Erectile dysfunction. Lancet. 2013, 381:153-65. 10.1016/S0140-6736(12)60520-0
- Wang DE, Wadhera RK, Bhatt DL: Association of rankings with cardiovascular outcomes at top-ranked hospitals vs nonranked hospitals in the United States. JAMA Cardiol. 2018, 3:1222-5. 10.1001/iamacardio.2018.3951
- Nadim MK, Forni LG, Mehta RL, et al.: COVID-19-associated acute kidney injury: consensus report of the 25th Acute Disease Quality Initiative (ADQI) Workgroup. Nat Rev Nephrol. 2020, 16:747-64. 10.1038/s41581-020-00356-5
- Naspro R, Da Pozzo LF: Urology in the time of corona. Nat Rev Urol. 2020, 17:251-3. 10.1038/s41585-020-0312-1
- Teoh JY, Ong WL, Gonzalez-Padilla D, et al.: A global survey on the impact of COVID-19 on urological services. Eur Urol. 2020, 78:265-75. 10.1016/j.eururo.2020.05.025
- Sansone A, Jannini EA: COVID-19 and erectile dysfunction: endothelial dysfunction and beyond . World J Mens Health. 2021, 39:820-1. 10.5534/wjmh.210081
- Tasnim S, Hossain MM, Mazumder H: Impact of rumors and misinformation on COVID-19 in social media. J Prev Med Public Health. 2020, 53:171-4. 10.3961/jpmph.20.094