

Study identifies a simple way to reduce healthcare costs

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A study led by a Loyola University Medical Center ENT physician provides a case study of a simple action that can reduce healthcare costs without compromising care.

Matthew Kircher, MD, and colleagues examined one of the costs associated with surgery to remove a type of cyst, called a cholesteatoma, from the [middle ear](#). Otolologists routinely send specimens to the pathology lab, but the study found this doesn't appear to be necessary.

The study found that in 178 cases involving seven otologists, there was virtually perfect agreement between the otologists' findings and the official diagnoses from the pathology reports. Since the otologists were always right, there appeared to be no need to go through the expense of confirming their findings.

Results are published online ahead of print in the *Laryngoscope* journal.

The results are similar to other studies that have concluded it's not always necessary to send tonsillectomy specimens to the pathology lab.

The increased cost of routine cholesteatoma pathologic evaluation should be considered among future healthcare cost-containing measures, because the clinical utility appears to be low, Kircher and colleagues wrote.

About 18,000 cases of cholesteatoma are treated each year in the United

States. Medicare pays \$62 for a microscopic evaluation of a specimen, while private insurers can pay much more. Researchers conservatively estimated that not doing these evaluations could save more than \$1 million per year.

"Although this number is small when considering the larger context of health care spending, we believe that this cost analysis represents a simple healthcare cost-containment opportunity," Kircher and colleagues wrote.

A cholesteatoma is a collection of trapped cells and other waste material that slough off into a pocket in the middle ear. As the cyst grows, it can break down middle ear bones and other nearby structures, causing [hearing loss](#), dizziness, [tinnitus](#) and [facial paralysis](#).

The study was conducted at the Michigan Ear Institute, where Kircher (first author) completed a neurotology fellowship before recently joining Loyola.

Kircher and colleagues reviewed 178 cases and found the "Cohen's kappa value" between otologists and pathologists was 0.93. A Cohen kappa value measures the agreement between two raters. Statistically, any rating higher than 0.81 is considered a perfect agreement. Researchers said larger studies might help to confirm their findings.

Provided by Loyola University Health System

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