

Coordinated care beneficial to kids with complex respiratory, gastrointestinal disorders

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Coordinated care by specialists for children with complex respiratory and gastrointestinal disorders helped lower hospital charges by reducing clinic visits and anesthesia-related procedures in a small single-center study, according to a report published online by *JAMA Otolaryngology-Head & Neck Surgery*.

Children with complex respiratory and gastrointestinal symptoms, also known as aerodigestive disorders, can present with a variety of diagnoses from sleep apnea and asthma to feeding disorders and gastroesophageal reflux. In the past decade, a number of pediatric tertiary care hospitals have established interdisciplinary clinics to coordinate care for these [children](#), including at least 35 centers in the United States as of May 2014, to coordinate care by gastroenterologists, otolaryngologists, pulmonologists and speech-language pathologists.

Joseph M. Collaco, M.D., of the Johns Hopkins Medical Institutions, Baltimore, and co-authors looked at the impact of interdisciplinary care provided by their pediatric aerodigestive center (PAC). The study was a medical record review for the first 125 [pediatric patients](#) (average age 1.5 years) seen at the PAC between June 2010 and August 2013, resulting in 163 outpatient clinical encounters.

Results from the study show that during the initial visit, each of the 125 patients received an average of 2.9 of four possible consulting services.

Physicians recommended evaluation under anesthesia for 85 patients (68 percent) and that resulted in 267 operations that required a total of 158 episodes of [general anesthesia](#). Combining procedures resulted in 109 fewer episodes of general anesthesia, which reduced the risks of anesthesia and related costs of \$1,985 per avoided episode.

"Although we observed a reduction in potential charges for medical care and a reduction in the number of episodes of anesthesia, there are certainly other nontangible benefits associated with the coordination of care that our study did not capture. Specifically, such potential benefits may include direct medical benefits of more rapid diagnoses and treatment, better communication between clinicians, decreased wait times for families to receive a coordinated plan of care, and indirect benefits such as improved caregiver satisfaction. Prospective longitudinal studies are needed to capture the benefits and improved outcomes that interdisciplinary pediatric aerodigestive clinics can potentially offer," the authors note.

More information: *JAMA Otolaryngol Head Neck Surg*. Published online December 4, 2014. [DOI: 10.1001/jamaoto.2014.3057](https://doi.org/10.1001/jamaoto.2014.3057)

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