

## Rise in day surgery has been good for patients and saved money

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The rising proportion of operations carried out as day cases over the past few decades has been good for patients and a much more efficient use of NHS resources, says John Appleby, Chief Economist at the King's Fund, in a databriefing for *The BMJ* this week.

The article is based on a recent report by the King's Fund: Better Value in the NHS

He explains that, in 1990, a review by the Audit Commission suggested that if all <u>health authorities</u> in England and Wales performed day surgery for 20 common procedures, such as <u>cataract surgery</u> and <u>gallbladder removal</u>, "an additional 186,000 <u>patients</u> could be treated each year without increased expenditure."

Following the review, the Department of Health set up a <u>task force</u> on day surgery along with £15m (€21m; \$23m) of capital funds to expand the number of dedicated day surgery units. By 2001, almost all trusts had at least one unit.

A 2001 follow-up review pushed for further progress: "If all trusts could achieve the levels of the best performers (the upper quartile of the distribution of the percentage of day cases), 120,000 existing inpatients in England and Wales could be treated as day cases to the benefit of all concerned."

Appleby shows that in 1974, around 7% (417,000) of all elective and



non-elective procedures in England were carried out as day cases each year. This proportion increased to nearly 35% (6.3 million) by 2013.

As day case patients cost less to treat than patients who stay overnight as inpatients (in 2013-14, the average day case cost was £698 and the average elective inpatient case £3,375), the increasing proportion of day case activity has helped reduce overall costs, he writes.

But imagine if the switch to day cases had not changed, says Appleby.

Based on national reference costs reported by English hospitals, the total cost of treating the 6.96 million elective day and inpatients in 2013 was around £8.9bn. To treat this number of patients, but with the proportion of day cases as observed in 1998 would cost nearly £11bn (over 22% more).

By treating more patients as day cases, Appleby estimates that the NHS had in effect saved around £2bn by 2013, although he stresses this is likely to be an overestimate as it is based on the average costs of day cases and elective inpatients.

Even though day cases now account for nearly 80% of all elective procedures each year, it is likely that there is still scope for further increases, he adds.

"Assuming the proportion of day cases continues to increase at the same rate for the next decade as it has done in the 15 years since 1998, then, all other things being equal, the total spent on elective care in 2013 would pay for 22% more patient episodes in 2023," he concludes.

**More information:** UK NHS: Day case surgery: a good news story for the NHS, <a href="www.bmj.com/cgi/doi/10.1136/bmj.h4060">www.bmj.com/cgi/doi/10.1136/bmj.h4060</a>



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