

Study examines 'weekend effect' in emergency surgery patients

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Research has pointed to a 'weekend effect' in which patients admitted to the hospital on Saturdays or Sundays are more likely to die than those admitted on week days. A new study has now assessed whether a weekend effect exists in a specified population: patients admitted for emergency general surgery.

During the past 15 years in National Health Service hospitals in North England, there has been a [weekend effect](#) in patients undergoing emergency [general surgery](#) based on day of operation, but not day of admission. When this [mortality](#) difference was analyzed over the 15 years of the study, differences in weekend mortality were most pronounced in the earlier time periods and no longer present in the most recent analysis

The *British Journal of Surgery* study also revealed significant reductions in mortality for all emergency general surgery admissions, from 5.4 percent in 2000-2004 to less than 2.9 percent in 2010-2014, a relative reduction of 46 percent. When considering only postoperative mortality, rates fell from 7.5 percent in 2000-2004 to 3.6 percent in 2010-2014, a 52 percent relative reduction.

"Emergency surgery has long been recognised as an area of surgical practice that is high risk, complex and facing significant challenges with an ageing population. In conducting this research we found that there have been great improvements in outcomes overall, and also differences in care provided within the week and at the weekend," said Dr. Paul

O'Loughlin, senior author of the *British Journal of Surgery* article. "In the most recent time period studied we could no longer detect a statistical difference in outcomes on [patients](#) operated on at the weekend or during the week. Although significant challenges remain, we are pleased to show the responsiveness of the profession by providing increasingly high quality surgical care to this patient group."

More information: I. J. D. McCallum et al, Retrospective analysis of 30-day mortality for emergency general surgery admissions evaluating the weekend effect, *British Journal of Surgery* (2016). [DOI: 10.1002/bjs.10261](#)

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