

Americans more likely to seek surgical care during a pandemic if they and hospital staff are vaccinated

May 31 2022



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Americans are more likely to have surgery during a pandemic such as COVID-19 if they are vaccinated, the hospital staff are vaccinated, the



surgery is urgent or lifesaving (as opposed to elective), and the surgery is outpatient (i.e., not requiring an overnight stay), according to a new study published in *Vaccine*.

"It's critical to understand what factors affect a patient's decision to have surgery during an infectious <u>pandemic</u> if we want to help reduce deaths and illness. These factors include vaccination status of the patient and hospital staff, the need and length of hospital stay, and urgency of the procedure," said Keith Ruskin, M.D., FASA, study co-author, member of the American Society of Anesthesiologists' Committee on Patient Safety and Education and professor of anesthesia and critical care at the University of Chicago. "Having this knowledge could help guide health care institutions' future <u>vaccine</u> resource allocations and policies for vaccine requirements."

In the study conducted by the University of Chicago and Embry-Riddle Aeronautical University, 2,006 U.S. adults aged 18 or older (average age 41 years old) were surveyed about a hypothetical surgery. Participants were randomly assigned to one of two hypothetical experimental conditions during a viral pandemic (hospital required universal vaccination of personnel versus no requirement). Willingness to undergo surgery was assessed under several circumstances, including the urgency of surgery, time in the hospital, vaccination status of the participant, and if the hospital required all staff to be vaccinated. Data were collected in June 2021.

The largest effect on patients' willingness to have surgery during a pandemic was the urgency of surgery. Participants viewed lifesaving surgery as more essential than an elective procedure (e.g., a knee replacement) during a pandemic. Participants who were vaccinated were more willing to have a surgical procedure than their unvaccinated counterparts. Requiring hospital staff to be vaccinated played a role: 24% of those surveyed were unwilling to have lifesaving surgery without



universal vaccination (i.e., vaccination of both hospital staff and participant). This number decreased to 15% with universal vaccination, the authors note.

"Making the choice to not have surgery for an actual health problem could increase the risk of potential illness and disease attributable to pandemic-related fears," said Anna Clebone Ruskin, M.D., study coauthor and associate professor of anesthesia and critical care, University of Chicago. "This suggests a potential opportunity for public education."

Additionally, participants were more willing to undergo <u>outpatient</u> surgery than <u>inpatient</u> surgery. This is a valid concern, the authors note, given the risk of contracting COVID-19 increases with hospital length of stay (even though that risk is very small).

"Our study reveals that people have real fears about acquiring an infectious disease in the hospital if they need <u>surgery</u> during a global pandemic," said Dr. A. Ruskin.

"Our findings are not only relevant to COVID-19, but to future infectious disease pandemics," said Dr. K. Ruskin.

More information: Anna Clebone Ruskin et al, Effects of vaccination status in the United States on willingness to undergo surgery during a pandemic: A prospective survey study, *Vaccine* (2022). DOI: 10.1016/j.vaccine.2022.05.013

Provided by American Society of Anesthesiologists

Citation: Americans more likely to seek surgical care during a pandemic if they and hospital staff are vaccinated (2022, May 31) retrieved 8 May 2024 from



https://medicalxpress.com/news/2022-05-americans-surgical-pandemic-hospital-staff.html

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