



Risk of Death Higher for Patients Admitted at Weekend



According to an analysis published in *The BMJ*, patients who are admitted to hospital at the weekend are likely to be sicker and also have a higher risk of death as compared to patients admitted during the week.

The analysis, carried out in collaboration by University Hospital Birmingham NHS Foundation Trusts and University College London, examined the effect of hospital admission day on death rates across NHS England hospitals for 2013-2014. The results of this latest analysis confirm the findings from a similar analysis in 2009-2010.

The findings show that approximately 11,000 more people die each year within 30 days of admission to hospital on Friday, Saturday, Sunday or Monday as compared to Tuesday, Wednesday and Thursday. This could be attributed to the "weekend effect" since weekends are usually characterised by reduced support services that usually begin late Friday and last through Monday morning. This might explain why patients who are already in the hospital and remain so during the weekend do not have an increased risk of death. The results are consistent even when the severity of illness is taken into account.

While the authors point out that these numbers should not be ignored and efforts should be made to determine which services need to be improved at the weekend to tackle the higher risk of mortality, they also caution that it would be rash and misleading to conclude that these deaths could have been prevented.

During the analysis, the authors looked at patient characteristics, length of hospital stay, and time to death. 2.7 million patients were admitted each weekday on an average while 1.2 million patients were admitted on a Saturday and 1 million on a Sunday. 50 to 65 percent of those admitted on Saturday and Sunday were emergencies as compared to 29 percent on weekdays. Length of stay was also higher for patients admitted on a Saturday and Sunday. In addition, 24.6 percent patients admitted on a Saturday and 29.2 percent patients admitted on a Sunday had diagnoses that placed them in a higher risk of death category as compared to 20 percent for those admitted on weekdays.

The results reignite the debate on seven day working in order to improve quality of care and to reduce deaths. However, in a feature article, Helen Crump says that it is not clear how investment in seven day work week will reduce deaths and whether the costs would outweigh the benefits. She also warns that ramping up services at the weekend could leave a gap in the hospital's weekday rota and could potentially affect other services.

Paul Aylin in another editorial recommends that more research should be conducted to determine the relationship between staffing levels and services and patient safety.

Source: The BMJ

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