Duh? Postoperative Complications Lead To Readmissions

Skeptical Scalpel

God knows I've written more than my share of papers that the Nobel Prize Committee has rightfully chosen to ignore. I understand that academicians need to publish in order to keep their jobs. Writing a paper is hard work and I don't really want to demean it.

A paper reports that complications of surgery are linked to increased rates of readmission, and this seems rather obvious to me. It got a lot of media attention, and comment is needed.

The study, published in the Journal of the American College of Surgeons, looked at the records of over 1400 patients who had general surgical operations and found that 163 (11.3) were readmitted within 30 days of discharge.

The authors make some good points such as readmissions were not related to age, race, sex, or certain co-morbidities such as diabetes, smoking status, COPD, ascites, hypertension, steroid use, unintentional preoperative weight loss, history of bleeding disorders or renal disease. Readmissions were significantly more apt to occur if patients had preoperative dyspnea, open wounds or disseminated cancer.

But the main findings that readmissions were due to complications and the more complications a patient had, the more likely he was to have been readmitted, are not exactly earth-shattering.

The press release and articles accompanying the paper's publication were a little over the top.

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