## **CHAPTER VII**

## SUMMARY AND RECOMMENDATIONS

## 7.1 Summary

Safety and efficiency are now not the only parameters of interest for the choice of medical treatment, but also costs play an increasingly important role (Janson, 1994). It is very important that both efficiency of medical practices and their costs must be made available to decision makers in a systematic fashion that will allow them to make valid comparisons of many alternative uses of resources (Creese, 1979). In addition, more standardized use of the most effective best tolerated and least costly treatment regimes in large number of patients would have considerable benefit both in reducing morbidity and health care costs (Hooton, 1995). It is well known hat an institution can remain reconomically healthy by minimizing services and decreasing hospital stay (Gill, 1986).

In this study tonsillectomy data were analyzed. It was revealed that in

Benha there is no significant difference between age and the mean number of hospitalization days but it is noted that an increase in the patient age significantly increases the mean time of the operation. Also, there is a definite increase in the total mean cost of the operation with the increase in the age of the case. However, an increase in the age beyond twenty years does not significantly affect the mean total cost of the operation. The results also revealed that the total mean cost for children and adults represents a difference of 11.5%. It should be noted that there is a significant difference in the mean time of the operation between the resident and other staff members. Moreover, the degree of staff members is one of the most important transportant aspects affecting the total mean cost of the operation. The same observations are noted in Alexandria.

The types of postoperative treatment have been analyzed and it was noticed that antibiotics in Benha represents 4 2% of the total mean cost of the postoperative treatment. It was observed that in tonsillectomy operation in Alexandria the total mean cost of the post operative treatment was more than that in Benha by about 78%. This is due to the kinds of antibiotics used in Alexandria which was much more expensive than that used in Benha and the

antihistaminics -decongestants also were more expensive than that used in Benha

It is suggested that when all factors are equal the cost of the drug should be considered, especially with the proliforat on and availability of similar drugs (Fekete, 1994).

Finally, in comparing the total mean cost in Alexandria and Benha it was observed that the total mean cost in Benha was more than that in Alexandria by about 31%. This is because in Alexandria they are treating tonsillectomy patient as an outpatient whereas Benha policy is to treat the patient as an inpatient. However, there was no complications reported in both centers. This point was discussed by Dewesse (1977) who stated that when the operation has been done under optimum conditions, no remnants of tissue have been left, and adequate haemostasis has been done, the incidence of bleeding in the immediate postoperative period should be less than 0.5%.

The analysis of septoplasty data revealed that there is a significant difference in the mean time of the operation between the resident and other staff

members. Moreover, the total mean cost of the operation is much more in the case of the resident than that in the case of other staff members. It was also observed that there is considerable difference in the cost of antibiotics between Benha and Alexandria in addition to the difference in the cost of antihistaminic.

The cost of both of them was higher in Alexandria.

Comparing the total mean cost of different items between complicated and non-complicated cases revealed that the total mean cost of complicated cases was higher by about 9%. The major differences in cost were in the cost of postoperative treatment and the cost of hospitalization of the complicated cases. In comparing the cost of different items in septoplasty operation in Benha and Alexandria the cost of hospitalization in Benha was greater than that in Alexandria. This is because patients were in sepitalized in Benha for longer periods. It was found that the cost of anathesia in Benha is much greater than in Alexandria as in Benha general anathesia was used in most of the cases whereas in Alexandria local anathesia was used. Hall (1986) stated that septoplasty can be done purely under local anathesia or it can be done with local anathesia supplemented by a general anesthetic. It should be noted that the cost

of some items were greater in Alexandria than that in Benha. For example the cost of postoperative treatment and the cost of intraoperative treatment, the difference in the total mean cost of septoplas between Alexandria and Benha was 17%.

The analysis of tympanoplasty oper tion data revealed that there is no significant difference between the cost of e idaural incision tympanoplasty and postauricular incision tympanoplasty /pe without mastoidectomy (myringoplasty). Also in comparing the mean cost of different items in endaural incision tympanoplasty type I in Benha an l Alexandria there is a significant difference between the mean cost of hospitalization in Benha and Alexandria due to the increase of the number of days the patients spent in Benha. On contrast it was found that the mean cost of materials used in Benha, were less than that used in Alexandria. Also the postoperative reatment mean cost in Benha was less than that in Alexandria. these factors were the main causes that made the total mean cost in Alexandria endaural incision tympanoplasty type I (myringoplasty) exceeded that in Benha