

One Day Surgery Times

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ADSCON 2018

9th National Conference of The Indian Association of Day Surgery
3rd & 4th March, 2018, at Warangal, Telangana.

Day Surgery in Russian Federation:

Dear Friends,

Happy Diwali to all of you.

We had the opportunity to be invited to the Russian Federation for a Lecture on Day Care Surgery, during their 2nd International Conference: Modern Diagnosis and Therapy in Oncology, on 19th-20th Oct. 2017 in Obninsk,

about an hours drive from Moscow. In fact, this city was known as the Science City of Russia, with the first Nuclear Power plant station built there. It was the First Commercial Power Plant in the world, built in 1954, now, it is a museum.

This Conference was in collaboration with A. Tsyb Medical Radiological Research Center, Ministry of Health and BRICS Nations Alliance. There was participation from all BRICS members, with me as the only Surgeon.

I bring back some memories for you:



Day Surgery in Oncology: Indian Experiences



First lecture on Day Care Surgery in Russia



Dr. Elena Tsyb, Organising Secretary



With Prof. V. Galkin, Director of the Medical Research Center, dining at Tandoori Nights, Indian restaurant at St. Petersburg



The Indian Delegation: Dr. Seema Gaur, Dr. Neeta Bondray & Dr. Pinak Dande and kids.



An International gathering, apart from BRICS nationals, there were delegates and lectures from, US, Belgium, Austria, Germany, Switzerland and Greece.

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instruments which have been preserved over the years show the brilliance of the designer who fashioned them to resemble the jaws of animals and fishes. These are very similar to the modern day instruments which were invented separately. (4) Modern medicine has rekindled the interest in Ambulatory surgery and the last century has seen a gradual rise in its development.

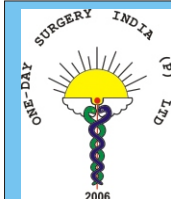
In 1908, James Nicoll (5) in one of the largest series to be published from the Royal Hospital for Sick Children in Glasgow, UK, reported the results of 7392 day care procedures in over 9 years. He stated that admitting children for certain operations "constitutes a waste of resources of a children's hospital". He recognized that results were comparable to those in admitted patients, with significant savings to the patient and to the hospital, and further stated that "with a mother of average intelligence, assisted by advice from the hospital sister, the child fares better than in the hospital". Even then, he recognised and stressed on suitable home conditions, with proper co-operation of the General practitioners, and a promise of re-admission if needed (6). Much later, a study in the early 1950s revealed that there was a significant rate of hospital related infections in children admitted for elective surgery (7).

As the cost of surgical treatment increased, Palumbo et al (1952) (8), reported on early ambulation in a group of 2955 male patients who had undergone major surgery and noted that the economic advantage of outpatient surgery hastened its acceptance (9). It was soon realized that about 35% of all operations could be performed without the need for hospital admission and more patients were treated on the same number of hospital beds. In 1972 Cloud presented a large series of wide varieties of case performed under endo-tracheal anaesthesia, establishing its absolute safety. Outpatient surgery quickly gained momentum and surgical care acquired a new dimension (10, 11)

Definition:


UK- The admission of selected patients to hospital for a planned surgical procedure, returning home on the same day. 'True day surgery' patients are day case patients who require full operating theatre facilities and / or a general anaesthetic, and any day cases not included as outpatient or endoscopy. (13)

USA- Minor Ambulatory surgery or out patient surgery, as that, where care is provided to non-hospitalised patients with immediate discharge. Local



Surgery & discharge on same day for:
Hernia, Piles, Fistula, Fissure, Diabetic foot,
Pilonidal sinus, Ingrown toe nail,
Lipoma, Sebaceous cyst, Abscess,
Circumcision, Vasectomy, D & C, Tubal
Ligation, Diagnostic Lap; etc. (In selected cases)
Extended stay: Appendix, Gall stones, Hystrectomy, etc.

Other Surgeries related to: Paediatric, Urology, Plastic, ENT, Vascular. Chemotherapy
& related treatment. (Please take prior appointment).



anaesthesia is almost invariably used.

Major Ambulatory Surgery is defined as surgery done under GA, Regional or LA, in which a period of post-operative recovery and / or observation is required before the patient is discharged home later the same day. (14)

Working definition:

We propose: Day care or ambulatory surgery is one wherein the patient is discharged on the same day of surgery or an invasive procedure. These patients require a fully equipped operation theater facility. Depending on the type of anaesthesia used, require a few hours of observation, thus, avoiding hospitalization. (15)

Nomenclature:

Day surgery is known by several names world over. The most commonly in use are: Day Case, Day Surgery, Major / Minor Ambulatory Surgery, 23-hours surgery, One-Day surgery, In & Out surgery, OPD procedures, etc. In our country, it is most prevalently known as Day Care surgery.

Statistics:

These have been taken from 3 leading Public hospitals and 2 Private Hospital, situated in the city of Mumbai. They are amongst the largest hospitals in the country. Their total bed strength is 5997 and they cater to approximately 1.5 million patients every year. Surgical OPD attendance is 258,889 patients, all surgical specialities combined. Of these patients, 80,991 underwent surgical procedures during the year 2003-2004.

The number of Day Surgery cases, including Minor and OPD procedures, was 36,239 surgeries. Out of which 27,138 would come under the category of Minor / OPD cases. Making True Day Surgery cases a mere 9,101, that is, 11.23% of the total number of cases being performed in this sample study. Most of the hospitals perform Day surgery as part of the regular surgical list.

Table I: Day Surgery in Nursing Homes (2003-2004):

	Cases	Beds	Cases/Bed
Gen. Surg.	853	7	121.85
Urology	928	25	37.12
ENT	300	5	60
Ophthalmology	1500	11	136.36
Gynac.	480	12	40
Plastic Surg.	400	6	66.66

To be completed.....



Patient's convenience and safety is our prime concern.