

요추 추간판 탈출증 환자의 단기 입원에 대한 임상적 분석

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= Abstract =

The Clinical Analysis of Short Hospitalization for Patients with Lumbar Disc Herniation

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Objective : The short hospitalization or outpatient care for patients undergoing laminectomy is not popular practice in Korea. We evaluated the clinical and economical significance of short hospitalization for patients undergoing microdiscectomy for their lumbar disc herniation.

Material and Methods : From March 1999 to December 2000, patients were hospitalized for intended short period hospitalization for lumbar disc surgery. Their radiological and clinical data were analyzed for their clinical and economical results. We compared these data with 20 patients who hospitalized conventionally.

Results : Total of 64 patients were evaluated. Three were lost to follow - up. Mean postoperative hospitalization period is 2.0 days(excluding one patient). Excellent to good outcome was achieved in 90.6 % of the patients. They payed about half expenses for hospitalization compared with conventional group. Their mean number of outpatient visit was 3.0.

Conclusion : Short hospitalization for lumbar disc surgery is an acceptable option in Korea. It is also economically beneficial while achieving acceptable clinical results.

KEY WORDS : Lumbar disc surgery · Short hospitalization · Economical.

서 론

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2. 수술방법 및 항생제 처방

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(patient charge)

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3.04 ± 2.22
(2~13).
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(Mann - Whitney Ran Sum Test, Sigmastat for windows version 2.03,

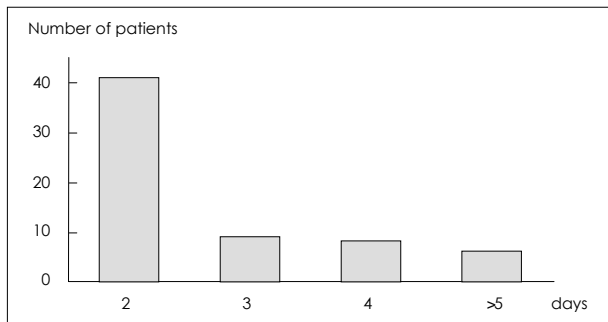


Fig. 1. Hospitalization period of short-hospitalized patients undergoing microdiscectomy. Sixty four percent of patients discharged a day after surgery.

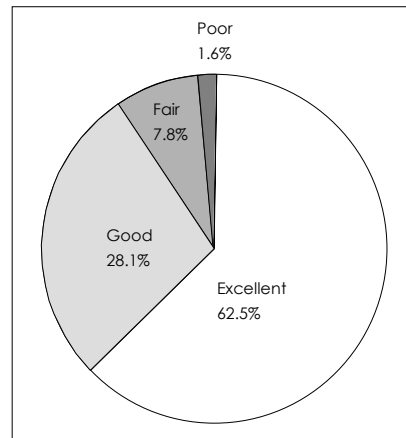


Fig. 2. Overall clinical outcome of short hospitalization group. Over ninety percent of the patients achieved a successful outcome.

64.1% . 9 3 , 8 4 가 .
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excellent가 40, good 18, fair가 5, poor가 1 (Fig. 2).

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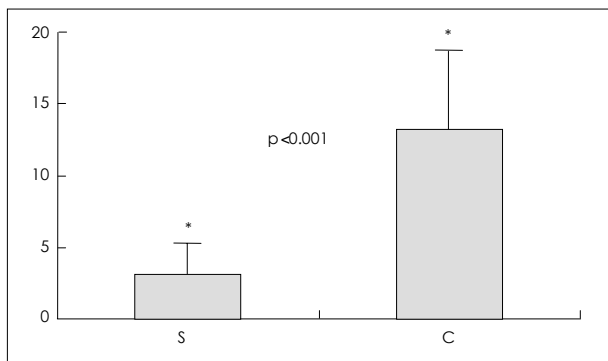


Fig. 3. Hospitalization period of short versus conventional hospitalization group. The conventional hospitalization group spent more than 4 fold period in the hospital($p<0.001$, Mann-Whitney rank sum test). S : short hospitalization group, C : conventional hospitalization group.

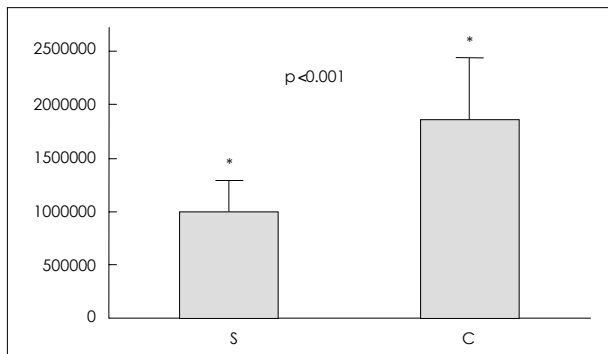


Fig. 4. Patient charge of short versus conventional hospitalization group. The short hospitalization group spent about half expense for their admission($p<0.001$, Mann-Whitney rank sum test). S : short hospitalization group, C : conventional hospitalization group.

986,207 \pm 297,768 (557,680~1,999,290) ().
28,638 \pm 22,284 (4,900~381,410)
3.00 \pm 2.39
(1~11) . , 1997
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13.05 \pm 5.56 (7~30) (Fig. 3).

1,846,280 \pm 584,846 (1,070,551~3,092,147) (Fig. 4).

3.74 \pm 2.74 (1~10) .
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(Mann - Whitney Rank Sum test, $p<0.001$),

가 (Mann - Whitney Rank Sum test, $p=0.519$)(Fig. 5).

고 찰

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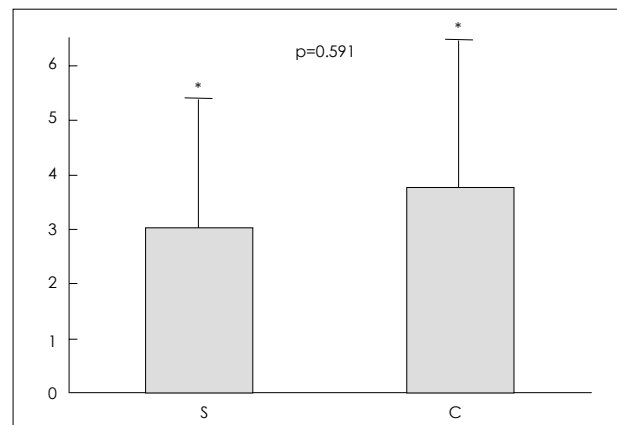


Fig. 5. The number of outpatient visit of short versus conventional hospitalization group. There was no statistical difference between them($p=0.519$, Mann-Whitney rank sum test). S : short hospitalization group, C : conventional hospitalization group.

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