

A Prospective Audit: Recognizing The Emotional and Economic Burden on Patient's Household In The Transfer From District to Tertiary Hospital for Surgical Care

JH Fu¹, SW Wong¹, NN Deser¹, IB Chua¹, JQ Lau¹, ZH Tay¹, SA Theivendran¹, CY Soon¹, SL Siow¹

¹ *Department of General Surgery, Sarawak General Hospital, Kuching, Malaysia*

Aim: Accessibility to Essential Surgical Care remains inadequate in Sarawak and patients need to travel to State Hospital for surgical care. However, the impact of the travel is unknown. This study aims to characterize the expenditure and emotional burden experienced by patients and their household when transferred from district centers to Sarawak General Hospital.

Method: This is a prospective audit study. Consecutive patients transferred from district centers to Sarawak General Hospital over the 4-week period from 18 January 2023 to 14 February 2023 were included. Epidemiology, clinical characteristics, expenditure and emotional burden of patients were obtained and tabulated. Data analysis performed with data presented in means and percentages.

Result: This study included 50 patients from all regions of Sarawak. They were 55 years old by average, 54% female and 70% Dayak. 76 % were married, 10% widowed, 14% single. 60 % of them were admitted emergently. The mean duration of admission was 8 days. 22% patients were managed with bellwether procedures. 2 patients experienced minor post-operative complications of Clavien-Dindo grade 1. Another patient underwent a failed procedure of chemoembolization. 86% had accompanying caretakers. Financially, the median income of the patients is RM1500, with 86% belonging to B40 category. 24% patients required social welfare. Mean value for the total expenditure for this journey, including the cost of district and tertiary hospital care, travel, food and accommodation is RM110.33 per patient. At least 60 % of the patients were stressed about transfer. Overall, patients were more satisfied with the care provided at tertiary center than district center.

Conclusion: This study demonstrated that a majority of patients and their household experienced both emotional and economic burden for being transferred from district to tertiary center for surgical care. Surgical capability of district hospitals must be upgraded and to meet the strong public demand.