

Readmission seen in 7 percent of elective spine surgeries

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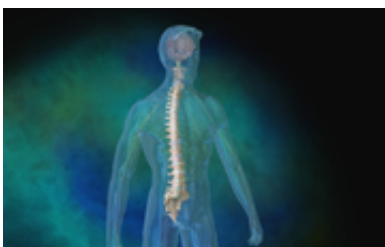


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(HealthDay)—About 7 to 8 percent of Medicare beneficiaries who undergo elective spine surgery for degenerative conditions are readmitted to the hospital within 30 days, according to a study published in the October issue of *The Spine Journal*.

Marjorie C. Wang, M.D., M.P.H., of the Medical College of Wisconsin in Milwaukee, and colleagues examined the reasons for and predictors of 30-day readmission for a retrospective cohort of 343,068 [Medicare beneficiaries](#) who underwent cervical and lumbar [spine](#) surgery for degenerative conditions between 2003 and 2007.

The researchers found that 7.9 percent of those who underwent cervical

surgery and 7.3 percent who had lumbar surgery were readmitted within 30 days of discharge. Surgical complications were the most common reason for readmission (26 to 33 percent), as well as musculoskeletal conditions in the same area of the operation (15 percent). For both operations, significant predictors of [readmission](#) included older age, greater comorbidity, eligibility for both Medicare and Medicaid, and a larger number of fused levels. Additional risk factors for [cervical spine](#) readmissions included male sex, myelopathy, and a posterior or combined posterior/anterior approach. Additional risk factors for lumbar spine readmissions included black race, Middle Atlantic geographic region, fusion [surgery](#), and an anterior approach. These factors accounted for more than 60 percent of the variability in readmissions.

"Both patient factors and operative techniques are associated with readmissions," the authors write. "Interventions to minimize readmissions should be specific to surgical site and focus on high-risk subgroups where clinical trials of interventions may be of greatest benefit."

More information: [Abstract](#)
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