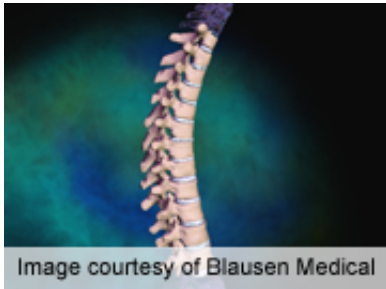


Racial disparities exist in outcomes of spinal surgery

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The rate of complications, length of stay, and costs associated with surgery for lumbar spinal stenosis differ for African-American patients compared with white patients, according to research published in the May 15 issue of *Spine*.

(HealthDay)—The rate of complications, length of stay, and costs associated with surgery for lumbar spinal stenosis differ for African-American patients compared with white patients, according to research published in the May 15 issue of *Spine*.

Shivanand P. Lad, M.D., Ph.D., of Duke University in Durham, N.C., and colleagues conducted a retrospective, cross-sectional study to evaluate racial disparities in outcomes of lumbar stenosis surgery. Medicaid data were examined for African-American and non-Hispanic white patients who underwent laminectomy or fusion for lumbar stenosis. The effect of race on rate of reoperations, complications, and costs associated with surgery was examined.

The researchers found comparable rates of reoperation in African-American and white patients within two years after an operation for lumbar stenosis (7.14 and 7.89 percent, respectively). After adjusting for length of hospital stay, comorbidities, sex, and age, the risk of postoperative complications was higher in African-American patients compared with white patients immediately after surgery (adjusted odds ratio

[aOR], 1.819), at 30 days (aOR, 1.746), and at 90 days (aOR, 1.611). Other significant differences included longer length of stay (five versus three days), higher hospital-related costs (\$24,267 versus \$16,148) and, at two years, fewer overall prescriptions (91 versus 138) and lower [medication costs](#) (\$5,297 versus \$8,450), in African-American patients compared with white patients.

"At the national level, there are several [racial disparities](#) in the rate of complications, length of stay, and costs after surgery for [lumbar spinal stenosis](#)," the authors write.

More information: [Abstract](#)
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