Physician volume, physician specialty and in-hospital mortality for patients with acute myocardial infarction

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摘要

Abstract

This study sets out to assess the relationship between in-hospital mortality rates and physician acute myocardial infarction (AMI) volume, along with an examination of the impact of physician specialty on in-hospital mortality rates in Taiwan. Analysis was undertaken on a total of 19,086 patients hospitalized for AMI, following the division of the sample patients into four roughly equivalent groups. Within each physician specialty, the AMI patients were also subsequently grouped into four roughly equivalent groups based upon physician volume. After adjusting for other factors, the likelihood of in-hospital mortality among patients treated by low-volume physicians was 2.141 (p<0.001) times as high as that for patients treated by high-volume physicians, and 2.410 (p<0.001) times as high as that for patients treated by very high-volume physicians. However, while such an inverse relationship was found to persist for those physicians specializing in general internal medicine and 'others', this was not the case for cardiologists.