某區域醫院急性缺血腦中風之醫療成本

Cost of Hospitalization forAcute Ischemic

Stroke at a Regional Hospital

張英明;陳品玲;胡朝榮;游家銘;吳柏瑞;陳俊亨

摘要

目的:本研究之目的在探討台北市立仁愛醫院急性缺血性腦中風住院病人之直接 醫療成本,且與醫學中心之資料作比較,期能找出可以減少成本支出之因素。方 法:將台北市立仁愛醫院神經內科自 2003 年 1 月 1 日至 2003 年 12 月 31 日間住 院之急性缺血性腦中風病人共 115 人,分析其人口學資料及直接醫療成本(direct medical cost),並探討影響直接醫療成本之因素。結果:本研究之病人平均年齡 為 70.4 歲,且以男性稍多,約佔 55.5%。僅約 20%病人係發病後三小時到院。 74.4%的病人有危險因素,其中以高血壓(74.4%)及陳舊性腦中風(35.7%)佔最多 數。病人入院時之疾病嚴重度為 NIHSS 之 6.9±7.3 分(最低 2 分,最高 34 分)。而 缺血性腦中風之種類依 TOAST 之分類則以小動脈硬化梗塞(43.5%)佔最多數,其 次為大動脈硬化梗塞(39.1%),第三位及第四位分別為心因性栓塞(8.7%)及其他未 能分類者(8.7%)。每一個病人之平均成本為新台幣 50,108 元,每人每天之成本 為 4,041 元。以複迴歸分析發現僅疾病之嚴重度及平均住院日影響急性缺血性腦 中風住院病人之醫療成本。結論:台北市立仁愛醫院急性缺血性腦中風病人之平 均醫療成本,低於醫學中心同類病人之醫療成本。而減少平均住院日是唯一降低 急性缺血性腦中風住院病人醫療成本之有效方法。

Abstract

Objectives: The aims of this study were to investigate the direct medical cost of patients with acute ischemic stroke at Taipei Municipal Jen-Ai Hospital and to compare the findings with those of two other medical centers in Taiwan in order to find ways of reducing costs. Method: FromJanuary 1, 2003 to December 31, 2003 the demographic data of 115 patients admitted to Taipei Municipal Jen-Ai Hospital with acute ischemic stroke were collected to analyze the direct medical costs and the factors affecting the costs. Results: The mean age of the patients was 70.4 years with male predominance (55.5%). Only 20% of the patients arrived at the hospital within 3 hours after onset of symptoms. Hypertension (74.4%) and previous stroke (35.7%) were the most common causes of the patients with risk factors. The average severity of stroke at admission was 6.9 ± 7 . 3 based on National Institute of Health and Stroke Scale (NIHSS) score. The percentage of small artery

atherothrombotic type (43.5%) was more than that of large artery atherothrombotic type (39.1%) according to the Trial of Org 10172 in Acute Stroke Treatment. (TOAST) classification. Cardiac embolization (8.7%) and undetermined cause of stroke (8.7%) were the other types of acute ischemic stroke. The average direct medical cost for each patient was NT\$ 50,108 (\$1 US 32 NT\$), which was the equivalent to an average daily cost NT \$ 4,041 per patient. Only stroke severity and length of stay (LOS) affected the cost of acute ischemic stroke. Conclusion: The cost of patients with acute ischemic stroke at Taipei Municipal Jen-Ai Hospital was lower than that of other medical centers in Taiwan. We concluded that shortening the LOS was the only way to reduce the costs. (Full text in Chinese)