

Unplanned readmission common after spine fusion

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William W. Schairer, M.D., from the University of California in San Francisco, and colleagues conducted a <u>retrospective cohort study</u> involving 836 patients who underwent spine fusion (111 short, 402 medium, and 323 long fusions) for the treatment of adult spinal deformity. The authors sought to assess the rate, causes, and risk factors for unplanned hospital readmission.



The researchers found that the overall unplanned <u>readmission rates</u> were 8.4 and 12.3 percent at 30 and 90 days, respectively. The rates of readmission were higher for patients with long fusions versus short or medium length fusions. Almost half (45.6 percent) of readmissions were due to surgical site infections. Longer fusion length, higher patient severity of illness, and specific medical comorbidities were risk factors for readmission.

"Unplanned hospital readmissions after <u>spine fusion</u> for adult <u>spinal</u> <u>deformity</u> are common, and are most often due to surgical site infection," the authors write. "Patient medical comorbidities are an important part of assessing risk and can be used by providers and patients to better assess individual risk prior to treatment."

The authors disclosed relevant financial activities outside the submitted work.

More information: Abstract

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