Epidemiological Profile of Otorhinolaryngology Emergency Unit Attendances in a High Complexity Hospital.

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ABSTRACT

The urgencies and emergencies are common disorders in ear, nose and throat (ENT) practice and have low predilection to invade hospital. In this study, we evaluated 10,000 medical records of attendances in the emergency department of otorhinolaryngology of a high complexity hospital in São Paulo, for a period of 12 months. Data were: age, sex, clinical diagnosis and management. The etiological subdivision of the urgency / emergency attendances, following the criteria described by Cuchi et al., was carried out from medical records of the orthopedic / emergency and not urgent / emergency department. The urgencies and emergencies are common disorders in ear, nose and throat (ENT) practice and have low predilection to invade the hospital system functioning of high complexity hospital in São Paulo, for a period of 12 months. Data were: age, sex, clinical diagnosis and management. The etiological subdivision of the urgency / emergency attendances, following the criteria described by Cuchi et al., was carried out from medical records of the orthopedic / emergency and not urgent / emergency department.

RESULTS

In the emergency room of Hospital São Paulo, 205,486 visits were made in the time period of the study. 18,279 were attendance (8.91%) divided by subspecialty. Rhinology registered 15,591 visits (12.29%), followed by Rhinology with 15,591 (14.79%) and HNS (1.79%) in HNS. Among the 15,640 medical records included in the study, 9,818 (62.77%) corresponded to attendances considered as urgency / emergency and 5,822 (37.23%) as not urgent / emergency. In regard to the subspecialty division, the urgencies / emergency attendances (442 (65.41%)) were attended in Otolaryngology, 1,767 (44.39%) in Rhinology, 1,740 (71.74%) in Pharingolaryngoestomatology and 5822 (72.86%) in HNS. The etiological subdivision of the urgency / emergency attendances, following the criteria described by Cuchi et al., was carried out from medical records of the orthopedic / emergency and not urgent / emergency department. The urgencies and emergencies are common disorders in ear, nose and throat (ENT) practice and have low predilection to the hospital system functioning of high complexity hospital in São Paulo, for a period of 12 months. Data were: age, sex, clinical diagnosis and management. The etiological subdivision of the urgency / emergency attendances, following the criteria described by Cuchi et al., was carried out from medical records of the orthopedic / emergency and not urgent / emergency department.

DISCUSSION

The urgencies and emergencies in otolaryngology comprises a great proportion of cases in high complexity hospitals, due to the high variability of the diagnostic pathway, specifically, otitis media and its acute forms (AOM), not associated with deficits of hearing or airway obstruction, and not associated with systemic complications. These attendances can be treated as primary care, otitis media and general medicine disorders. In our study, 8,422 attendances were classified as not urgent / emergency - emergency, which is in contrast to other studies that indicate that approximately 20% of the attendances included in the emergency / urgent care are classified as non-urgent / emergency. The new 880/2004 of the federal constitution, which provides for the health system organization, recommends that health policies should be aimed at ensuring that urgent care is made available for the population. However, the medical care is sought as an urgent or emergency care more due to the non-priority allocation of appointments to specialized health services than to the health status of the patient. There are some studies that describe the epidemiology of urgent / emergency room visits in otolaryngology, and that report some of the methods used for the classification of these attendances. In general, the urgent / emergency care represent a substantial fraction between the attendances studied, with variable percentages. In our study, we noted the highest proportion of urgency / emergency attendances, not defined as urgent / emergency or not urgent / emergency, which were classified as urgent / emergency - emergency. This fact can mean that urgent / emergency care is not being provided in the best possible way.

CONCLUSIONS

In the study conducted by Turutu et al., 11%, similar percentages were observed concerning attendances classified as emergency / urgent (31.9%), as defined by ANP and 45% and 51% respectively. However, there are studies that report an even lower proportion of urgent / emergency care. In our study, 8.91% of attendances were classified as urgent / emergency. However, the urgent / emergency care is not sought even in the case of non-urgent / emergency - emergency attendances. These results may be due to the low knowledge of the population of the importance of the attendance in the emergency/urgent area. The urgent / emergency attendances have an impact on public health department expenses, the quality of care offered to the population, the quality of health service provided by the health service, and the workload of specialized hospital services.

METHODS AND MATERIALS

This is an epidemiological study, cross sectional, conducted in the emergency department of otorhinolaryngology of a high complexity hospital in São Paulo, for a period of 12 months. Data were: age, sex, clinical diagnosis and management. The etiological subdivision of the urgency / emergency attendances, following the criteria described by Cuchi et al., was carried out from medical records of the orthopedic / emergency and not urgent / emergency department.

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REFERENCES