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Background

Muscular dystrophy (MD) patients are at risk of several complications, including respiratory failure as a main cause of death.¹



Objectives

Our aim is to describe the **profile and outcomes of MD-related hospitalizations and outpatient procedures** in the Brazilian Public Healthcare System (SUS).



Methods

Open data of **approved hospital admissions and outpatient procedures reimbursed by SUS** were obtained from the Hospital Information System and Outpatient Information System through the Informatic Department of SUS (DATASUS).

Selection criteria:

- Registers of patients with **muscular dystrophy** (ICD-10: G71.0).
- Approved between **2018 and 2022**.

Descriptive analysis were performed including patients' characteristics and clinical outcomes.



Results

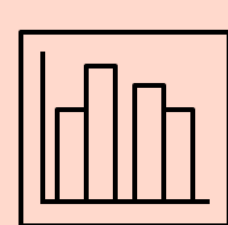
From the Hospital Information System



3,034 MD-related hospitalizations.

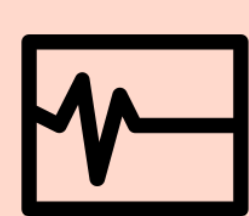


57% male, mean age of 27 ± 22 years.



Most frequent primary procedure codes:

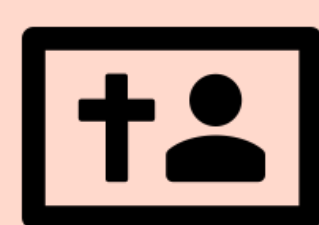
- 88,2% **MD treatment**
- 13% **treatment for neuromuscular diseases' complications**



4,8% overall in-hospital mortality rate for the five years



Payment by hospitalization (mean ± SD) BRL 3,544.5 ± 6,876.3.



Mortality rate of most common secondary diagnosis:

- 21.9% - Pneumonia**
- 22.0% - Respiratory failure**

From the Outpatient Information System



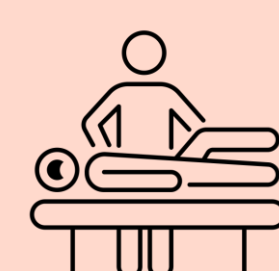
371,641 outpatient procedures registered



84% male

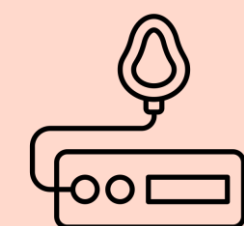


28% were performed in healthcare facilities located in cities other than patient's residence.



The procedures were mainly:

- Physiotherapy-related (respiratory or physical rehabilitation - 63%)
- Home-based non-invasive mechanical ventilation (24.6%).



Average annual cumulative payment by outpatient procedures was **BRL 11,948,533 ± 613,172.**



Conclusions

- Data from the last five years shows that **most MD-related procedures performed in the SUS were outpatient care.**
- The majority of **hospital procedures were due to MD treatment**, while **physiotherapy comprises most outpatient procedures.**
- **The primary comorbidities observed were respiratory system-related.**
- These results are important to characterize the **disease hospitalization and outpatient profile in the Brazilian Public Healthcare System** and are consistent with the natural history of muscular dystrophies.

References

1. Mercuri E, Bönnemann CG, Muntoni F. Muscular dystrophies. Lancet. 2019 Nov 30;394(10213):2025-2038. doi: 10.1016/S0140-6736(19)32910-1. PMID: 31789220