

DIFFERENCES IN HIP REPLACEMENT SURGERY IN THE STATE AND PRIVATE HEALTH CARE SECTORS IN HUNGARY

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OBJECTIVES

The aim of our study is to compare the differences in hip arthroplasty surgery between the state and private health care sectors in Hungary.

METHODS

Patients with hip prosthesis surgery were selected by simple convenience sampling technique at the Department of Orthopedics, Clinical Centre of the University of Pécs and at the Da Vinci Private Clinic in Pécs. Patients completed a questionnaire about the circumstances of the surgery (surgical procedure, approach, fixation, anaesthesia, drainage, blood transfusion).

RESULTS

The research involved 208 persons, 96 persons (40 male, 56 female, mean age: 64.33 years) in the state, 112 persons (53 male, 59 female, mean age: 63.36 years) in the private sector. The main surgical indication was coxarthrosis (Figure 1-2). There is a significant difference in the type of surgical approach, as the state care mainly uses anterolateral approach (96.88%) and the private care only anterior approach (100%). There is also a large difference in the type of surgical procedure, with patients in the state sector undergoing traditional surgery (98.96%) and patients in the private sector undergoing minimal invasive surgery (100%). In the state sector the proportion of cemented fixation ($p < 0.001$), while in the private sector the proportion of non-cemented fixation was significantly higher ($p < 0.001$). The proportion of general anaesthesia was significantly higher in the state sector ($p < 0.001$) and on the private side, combined anaesthesia ($p < 0.001$) and stunning ($p = 0.013$). Blood transfusions were required in 30.21% of patients in the state sector compared to only one patient (0.89%) in the private sector ($p < 0.001$). While drain insertion occurred in 98.96% of the state care, only 34.82% in the private sector ($p < 0.001$) (Table 1).

CONCLUSIONS

Our results show that the state and private sectors have different surgical preferences for total hip arthroplasty surgery. The type of surgical procedure is largely determined by the institution and the surgeon's preference.

		STATE CARE SECTOR		PRIVATE CARE SECTOR		Sig.
		N	%	N	%	
TYPE OF EXPLORATION	ANTERIOR	1	1.04	112	100	$P < 0.001$
	ANTEROLATERAL	93	96.88	0	0	$P < 0.001$
	POSTERIOR	2	2.08	0	0	
SURGICAL PROCEDURE	TRADITIONAL	95	98.96	0	0	$P < 0.001$
	MINIMAL INVASIVE	1	1.04	112	100	$P < 0.001$
TYPE OF FIXATION	CEMENT PROSTHESIS	28	29.17	9	8.04	$P < 0.001$
	NON-CEMENT PROSTHESIS	65	67.71	101	90.18	$P < 0.001$
	HYBRID	3	3.13	0	0	
ANAESTHESIA	NARCOSIS	44	45.83	14	12.50	$P < 0.001$
	ANAESTHESIA	43	44.79	38	33.93	
	COMBINED ANAESTHESIA	3	3.13	41	36.61	$P < 0.001$
	STUNNING	5	5.21	18	16.07	$P = 0.013$
BLOOD TRANSFUSION	YES	29	30.21	1	0.89	$P < 0.001$
	NO	63	65.63	111	99.11	$P < 0.001$
DRAIN	YES	95	98.96	39	34.82	$P < 0.001$
	NO	0	0	73	65.18	

Table 1
Surgical characteristics in the state and private care sectors

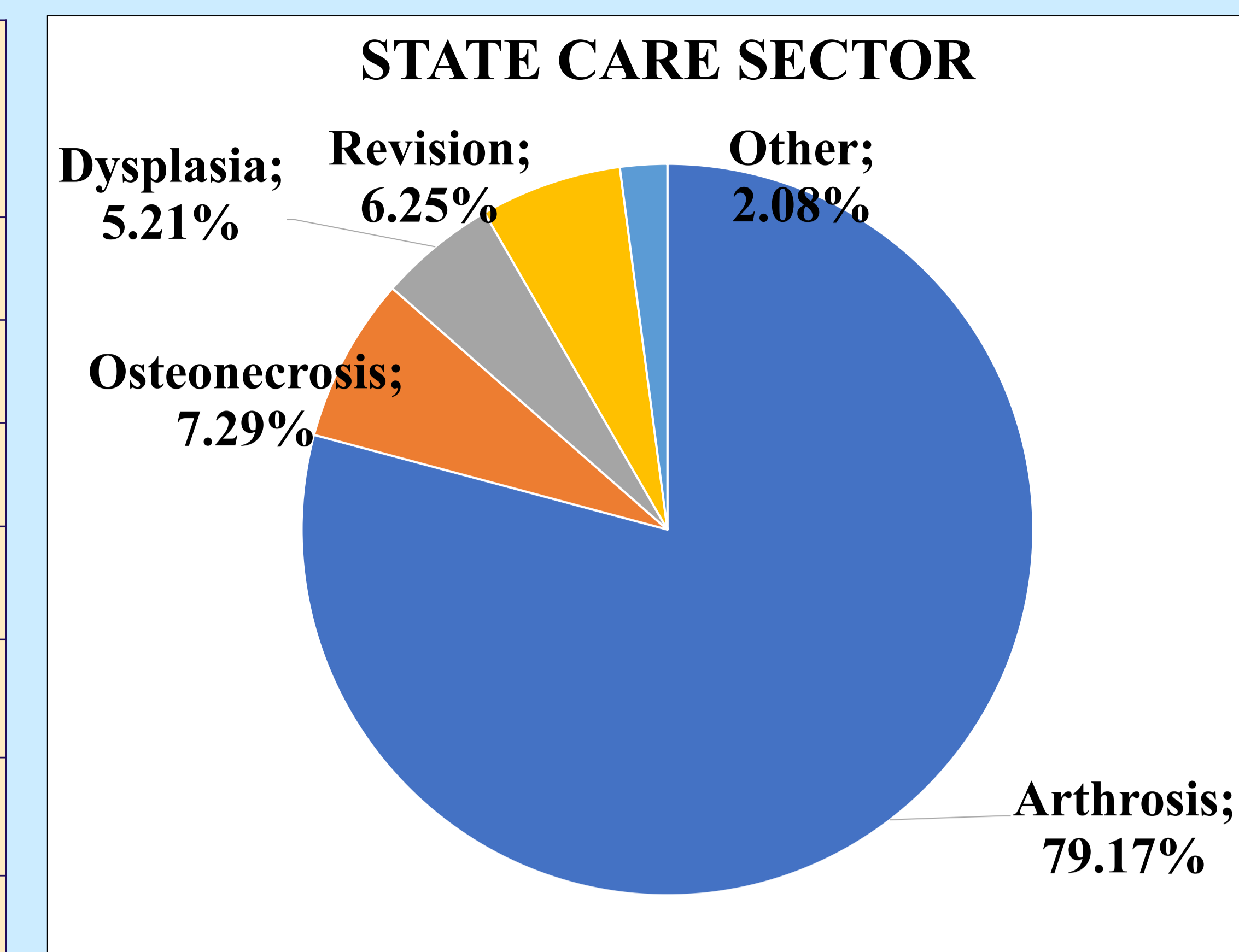


Figure 1
Indication of surgery in the state care sector

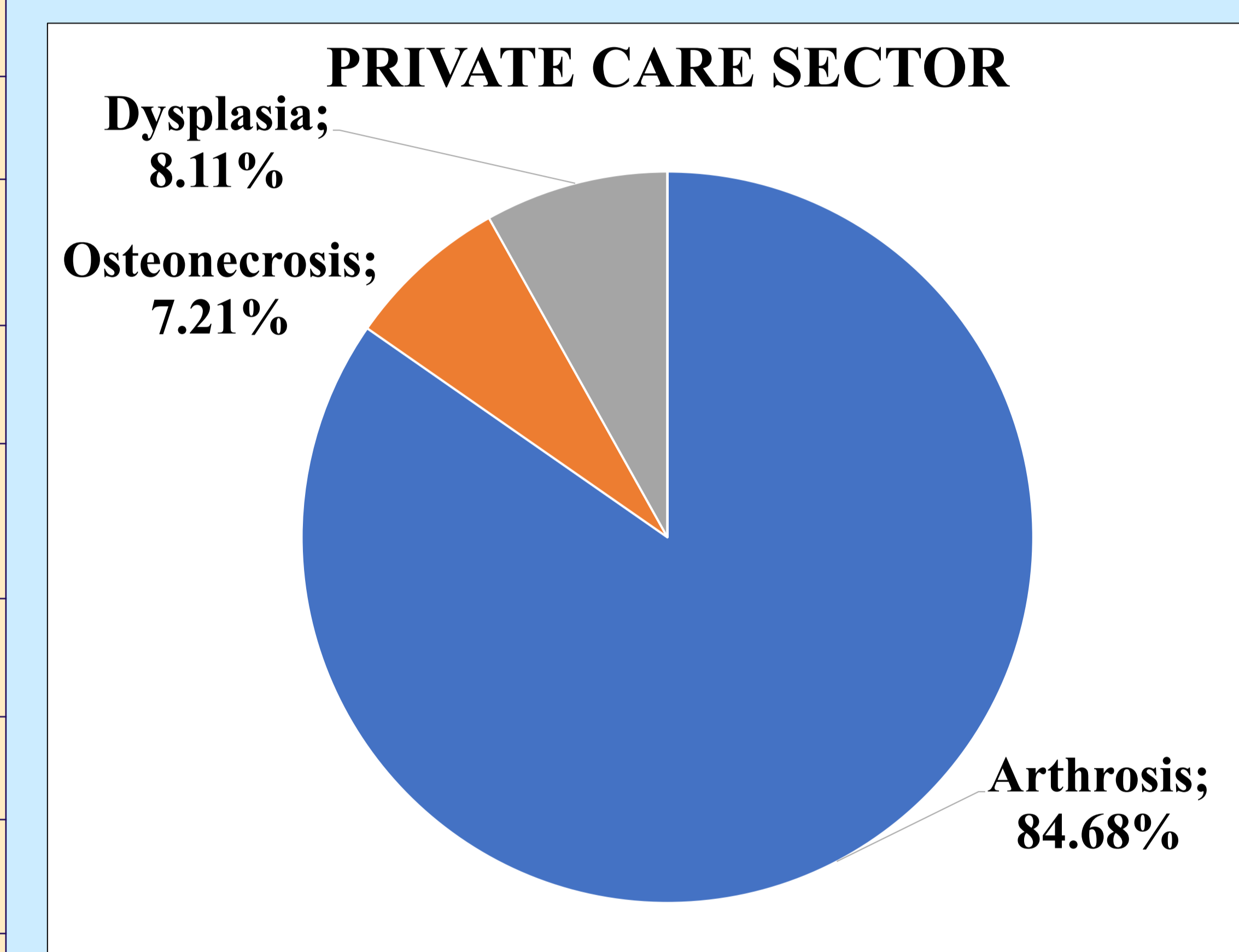


Figure 2
Indication of surgery in the private care sector



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