Management Of Chronic Subdural Hematoma At Lower Cost

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Chronic subdural hematomas are frequent intracranial hemorrhages. Their management is still discussed and there are many options. In these times of economic crisis, we have to think about managements that can be safe and efficient with less healthcare expenditure.

The study is about 189 patients all operated with a technique of burr hole, spontaneous and open drainage. We didn't give prophylactic anticonvulsant therapy and patients didn't have a systematic early CT scan unless they presented an aggravation. In this work we have calculated the cost of our management and compare it with cost management of patients operated with closed drainage by Jackson Pratt kits and who have early systematic CT scan and prophylactic anticonvulsant therapy.

Rates of complications, mortality and recurrences were respectively 15.3%, 5.8%, and 14.2%; these results were in concordance with those of literature. The cost of management was 2420\$ for the total of patients. If we used closed drainage, practice early CT and give a prophylactic anticonvulsant therapy we would have a cost of 33911\$. We have then saved 31491\$ for a total of 189 patients.

It appears from this study that we can manage safely and efficiently chronic subdural hematomas at lower cost. However, a large multicentric study is ongoing.