

ABSTRACT

Background:

Patients who discharged against medical advice (AMA) are at higher risk of readmission and mortality than those who discharged normally. However, the characteristics of those discharge AMA (Signed & Left and Absconded) patients have not been studied in Myanmar. This study aims to clarify the characteristics of Signed & Left (S/L) and Absconded (Abs) patients in Nay Pyi Taw General Hospital for considering measures of reduction of S/L and Abs.

Methods:

This study was conducted at a tertiary hospital in Nay Pyi Taw, Myanmar. Study participants were all the patients who discharged from the hospital between 1st January 2016 and 31st December 2016.

A retrospective descriptive study was conducted to clarify the characteristics of Signed & Left and Absconded patients by using hospital records.

Results:

Of 36971 discharges during the period, number of each discharge type was 1090 (2.9%) S/L, 529 (1.4%) Abs, 997 (2.7%) death in the hospital (Expired), and 33447 (90.5%) normal discharge (D/C). Characteristics in are shown separately by age group (less than five-years-old and five-years and more)

<Less than five-years-old >

Male of S/L and Abs patients (52.2%, 60.2%) were almost same to D/C patients (58.6%). S/L patients were less likely to come from NPT union (60.0%), and more likely to be referred-in from other hospitals (34.5%) compared to other discharge statuses. Chapter 16 Certain conditions originating in the perinatal period was the most common ICD-10 chapter in all ICD-10 chapters (diagnoses) in Abs patients (35.8%) as well as D/C (28.8%) and Expired (68.8%) patients. On the other hand, in S/L patients, Chapter 10 Diseases of the respiratory system was the most common ICD-10 chapter (26.7%).

<Five-years-old and more>

Both S/L and Abs patients were more likely to be male (58.1%, 60.8%). S/L patients were less likely to come from NPT union (54.1%) and more likely to be referred-in from other hospitals (27.0%) compared to other discharge statuses as well as less than five-years-old of age group. S/L patients were elder (53 years old) than other discharge patients. Chapter 19 Injury, poisoning and certain other consequences of external causes was the most frequent ICD-10 chapter in all ICD-10 chapters (diagnoses) in Abs patients (27.0%) as well as in D/C (20.5%) and Expired (36.8%) patients. Chapter 9 Diseases of the circulatory system was the highest proportion in S/L (23.6%) patients compared to D/C (8.8%) and Abs (6.4%) patients.

Conclusion:

This study showed that the characteristics of discharge AMA (S/L and Abs) patients were different from D/C and Expired patients. S/L and Abs patients should be also considered separately even though they were both discharge AMA patients. S/L and Abs patients have own characteristics each. It is important to investigate the actual situation of S/L and Abs such as reasons for self-discharge and their circumstances. Some counter-measures such as follow-up about continuous rehabilitation for S/L patients who have chronic hepatitis or liver cirrhosis, cooperation with other hospitals for S/L patients who came from far areas, information provision to patients and/or their families about how to care themselves after self-discharge, and telling the risk of self-discharge to patients, especially with severe infectious diseases, are necessary to reduce deterioration of diseases or mortality. This study can be utilized to conduct some implementation for S/L and Abs as a reference.