

Patient satisfaction

- Association between concomitant traumatic brain injury and unfavorable 1-year outcomes in patients with traumatic spinal cord injury
- The First Grade III Lumbar Spondylolisthesis Treated With the Novel 360° Artificial Disc/Artificial Facet Replacement Solution
- Evaluation of the clinical effectiveness of bundled care interventions on pressure ulcer incidence in neurosurgical patients
- Health education using customized aids for patients with osteoporotic vertebral fractures- a non-randomized controlled study
- Simulating Endonasal Endoscopic Skull Base Surgery on Animal Carcasses: A Prospective Observational Study
- Endovascular carotid artery revascularization utilizing multiple distal embolic protection strategies: active and passive flow reversal in combination with balloon assisted reperfusion
- The Impact of Virtual-, Augmented- and Mixed Reality during Preoperative Informed Consent: A Systematic Review of the Literature
- Barriers to Healthcare Access During the Coronavirus Disease 2019 (COVID-19) Pandemic: A Cross-Sectional Study Among Romanian Patients with Chronic Illnesses and Confirmed SARS-CoV-2 Infection

Patient [satisfaction](#) ratings are increasingly used for hospital [rankings](#), referral base, and physician [reimbursement](#). As such, online physician rating websites (PRWs) are quickly becoming a topic of interest.

Patient-reported experience is often used as a measure for [quality of care](#).

[Depression](#) has been associated with poor [outcomes](#) in neurosurgical [patients](#), including increased pain, poorer functional recovery, delayed return to work, and decreased patient [satisfaction](#).

The satisfaction of a group of 205 patients with regard to [anesthesia](#) used and their future preferences were evaluated [prospectively](#) through a [questionnaire](#). The reasons for dissatisfaction were assessed.

CEA was performed under general anesthesia (GA) in 159 cases (77.6%) and under local anesthesia (LA) in 46 cases (22.4%). In the GA group, 148 patients (93.1%) were satisfied; 30 patients (65.2%) in the LA group were satisfied ($p < 0.0001$). The reason for dissatisfaction with GA were postoperative [nausea](#) and [vomiting](#) (7 patients), postoperative psychological alteration (3), and fear of GA (1). The reasons for dissatisfaction with LA were intraoperative pain (9 patients), intraoperative discomfort and [stress](#) (5), and intraoperative breathing problems (2). Of the GA group, 154 (96.9%) patients would prefer GA again, and of the LA group, 28 (60.9%) patients would prefer LA if operated on again ($p < 0.0001$). Overall, 172 patients (83.9%) would prefer GA in the future, and 33 patients (16.1%) would prefer LA.

Overall patient [satisfaction](#) with CEA performed under both GA and LA is high. Nevertheless, in the GA group, patient satisfaction and future preference were significantly higher. Both GA and LA have

advantages and **disadvantages** for CEA. An optimal approach is to make use of both anesthetic techniques based on their individual indications and patient preference ¹⁾.

Overall patient satisfaction with elective cranial neurosurgery is high. Even 9 of 10 patients with postoperative major morbidity rated high overall patient satisfaction at 30 days. Overall patient satisfaction may merely reflect patient experience and subjective postoperative health status, and therefore it is a poor proxy for quality of care in elective cranial neurosurgery ²⁾.

Patient satisfaction metrics

Patient satisfaction metrics.

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Mracek J, Kletecka J, Holeckova I, Dostal J, Mrackova J, Mork J, Priban V. Patient Satisfaction with General versus Local Anesthesia during Carotid Endarterectomy. J Neurol Surg A Cent Eur Neurosurg. 2019 Apr 29. doi: 10.1055/s-0039-1688692. [Epub ahead of print] PubMed PMID: 31035296.

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Reponen E, Tuominen H, Hernesniemi J, Korja M. Patient Satisfaction and Short-Term Outcome in Elective Cranial Neurosurgery. Neurosurgery. 2015 Aug 4. [Epub ahead of print] PubMed PMID: 26244270.

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