

Wasteful care

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Wasteful care refers to healthcare **practices** that do not provide **value** to patients and can include unnecessary **tests**, treatments, or procedures. This can be due to various factors such as:

Overuse of Resources: Performing tests or treatments that are not needed or are unlikely to benefit the patient.

Inefficiency: Ineffective use of time or resources that do not contribute to improved patient **outcomes**.

Variability in Practice: Differences in care practices that lead to inconsistent patient outcomes without clear evidence of benefit.

Lack of Coordination: Fragmented care where different providers or services do not communicate effectively, leading to redundant or conflicting interventions.

Reducing wasteful care is important for improving the **quality** and **efficiency** of healthcare. Strategies to address it can include implementing evidence-based guidelines, improving care coordination, and utilizing decision-support tools to ensure that the care provided is appropriate and beneficial for the patient.

Padula et al. in an article, examine how avoidable **complications**, post-acute healthcare use, **revision surgery**, and **readmissions** among **spine surgery** patients contribute to \$67 million of wasteful spending on value defects. Furthermore, they estimated that almost \$27 million of these **costs** could be recuperated simply by redirecting patients to facilities referred to as centers of excellence. In total, **quality improvement** efforts are costly to implement but may only cost about \$36 million to fully correct the \$67 million in finances misappropriated to value defects. The objective of this article is to present an approach to eliminate defects in **spine surgery**, including a **center of excellence** framework for eliminating defects specific to this group of procedures ¹⁾

¹⁾ Padula WV, Smith GA, Gordon Z, Pronovost PJ. Value Defects in Spine Surgery: How to Reduce Wasteful Care and Improve Value. J Am Acad Orthop Surg. 2024 Sep 15;32(18):833-839. doi:

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Last update: **2024/09/17 21:03**