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Title: The effect of a pleural diseases clinic on pleural effusion admission rates

Dr. Sujoy 27670 Saikia sujoysaikia@hotmail.com MD [1], Ms. Kay 27671 Rowe kay.rowe@wales.nhs.uk [1] and Dr. Helen E. 27672 Davies hedavies@doctors.net.uk MD [1]. [1] Department of Respiratory Medicine, University Hospital Llandough, Cardiff, United Kingdom .

Body: Background Patients with pleural effusion are frequently admitted to hospital on the medical intake. Some of these admissions may be predicted and acute admission avoided. Aim A weekly specialist pleural diseases clinic was established in May 2011. We assessed whether provision of dedicated clinic time for patients who may require pleural intervention would reduce hospital admission rates of patients with pleural effusion. Method A retrospective review of electronic records for patients attending the clinic between 01/06/11-30/11/11. Hospital records were analysed for pleural effusion admission events (ICD10 codes J90/J91) in this period and between 01/06/10–30/11/10. Results Table 1.

Characteristics of patients attending the pleural diseases clinic

		2011	2010
Patient number (new: follow-up)		89: 45	
Mean age (years (range))		68 (28-92)	
New patient diagnosis number (%)	MPE	47 (52.8)	
	Pleural infection	16 (18)	
	Cardiac failure	6 (6.7)	
Procedure type (%)	Diagnostic+/-therapeutic aspiration	64.6 (therapeutic only 15.2)	
	Chest drain insertion	26.6	
	IPC insertion	3.8	
Hospital admission rate (%)		17	
Total number of patients admitted with pleural effusion		81	37
Length of stay, mean (range)	Of all patients	4.4 (0-22)	8.78 (0-26)
		6.69 (0-22)	

	Excluding patients admitted from pleural clinic		
	Of patients admitted from pleural clinic	3.89 (1-7)	

MPE, malignant pleural effusion; PPE, parapneumonic effusion; IPC, indwelling pleural catheter

Conclusion Development of a pleural clinic is associated with a reduced length of stay for patients admitted with pleural effusion. This could have significant cost-saving implications. However, the number of admissions increased by 219% over the study period. The cause of this rise is not clear.