

## **Study summary**

**Background:** Patient satisfaction is a vital indicator of the quality of healthcare services available in a hospital. In recent times, it has become common practice to discharge women from the hospital early after an uncomplicated caesarean section, to satisfy their wishes, reduce cost and maximize efficient use of healthcare system resources.

**Objective:** To conduct a comparative analysis of patient satisfaction following day two hospital discharge versus day 5-7 discharge.

### **Primary outcome**

1. Patient's satisfaction with the discharge protocol used.
2. Cost of hospital care during and after admission
3. Rate of readmission or unscheduled medical consultation for any medically/surgically related complaint

### **Secondary outcome**

1. Sustainance of breastfeeding at 6<sup>th</sup> week postop
2. Willingness to go through same protocol in the next delivery.

**Methodology:** Eligible parturient who meet the inclusion criteria were selected into two groups. One group were discharged two days after an elective uncomplicated caesarean section and they were matched with a second group who will be discharged on the 5<sup>th</sup> or 7<sup>th</sup> day postop. The study group were followed up by means of daily phone calls from the researchers until they are one week postop. Thereafter both groups were seen at clinic on the 2<sup>nd</sup> and 6<sup>th</sup> week post-surgery. Their satisfaction, cost, morbidities and breastfeeding practices were evaluated using a specially designed questionnaire. This was accomplished using statistical package for social sciences version 20. Descriptive statistics were used for evaluation of continuous variables such as sociodemographic characteristics. Chi square test were used to compare means of categorical variable. A p-value of <0.05 at 95% confidence interval was considered significant. Results were written based on outcome of data analysis.

**Results:** The study was done over a period of one year, between 1<sup>st</sup> October, 2018 and 30<sup>th</sup> September, 2019 in Alex Ekwueme Federal University Teaching Hospital Abakaliki. As depicted in Figure 1, 232 cases of uncomplicated elective caesarean sections were managed during the study period. These patients were randomized into two groups, making 116 patients in each arm of the study. Of the 116 cases randomized, 113 met the inclusion criteria and were recruited. Three patients out of the 113 that met inclusion and recruited declined further participation and were excluded from the study, and another 2 patients were lost to follow-up. The remaining 108 cases were analyzed. In the control group, 114 met the inclusion criteria and were recruited. One patient in the control group declined further participation and was excluded from the study and another one patient was lost to follow-up. The remaining 112 patients in the control group was analyzed.

During the study period, 232 cases of uncomplicated elective caesarean sections were managed. These were randomized into two groups and 108 participants were finally analyzed in the study group and 112 participants in the control group. Day 2 hospital discharge following an uncomplicated elective caesarean section was not associated with higher rate of re-admission as compared with days 5-7 discharge ( $X^2=0.95$ , P value=0.329). There was no statistically significant differences in cost incurred by patients discharged on Day 2 after uncomplicated elective caesarean section as compared to those discharged on Days 5-7 after an uncomplicated elective caesarean section ( $X^2=1.65$ , P value=0.649). All the mothers discharged on Day 2 post-operation were satisfied with their management and their days of discharge when compared with those discharged on traditional Days 5-7 after an uncomplicated elective caesarean section and this was statistically significant ( $X^2=16.64$ , P value= 0.0001, OR = 0.857, 95% CI = 0.59-1.25). Majority of patients (79.6%) were able to initiation and sustenance breastfeeding after they were discharged from the hospital on the second day following an uncomplicated elective caesarean section and there was no statistically significant difference in the initiation and sustenance of breastfeeding among parturients discharged on Day 2 postop as compared with those discharged on Days 5-7 ( $X^2=4.45$ , P value = 0.108). Lastly, early hospital discharge did not have any significant negative impact on neonatal health and the rate of neonatal re-admission ( $X^2=1.063$ , P value=0.303).

**Conclusion:** Early discharge of patients after an uncomplicated elective caesarean section is associated with early initiation and sustenance of breastfeeding and good maternal satisfaction and maternal well-being. It did not significantly increase the risk of readmission or unscheduled medical consultation for any medically/surgically related complaint for the mother and her fetus; and has no negative effects on neonatal health or risk of neonatal readmission.

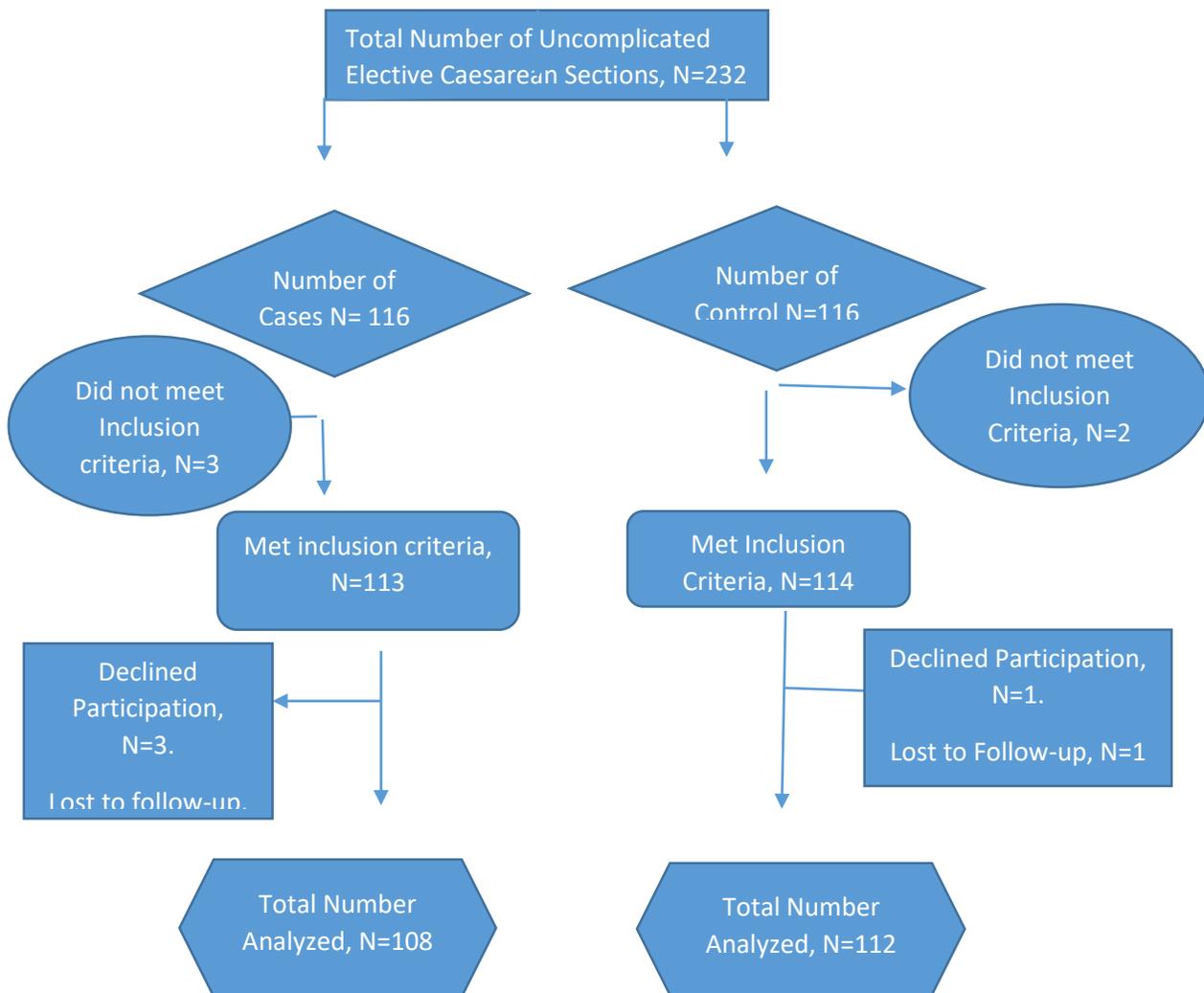


Figure 1: Flow Chart of Patients through the Study