COST-EFFECTIVENESS OF LAPAROSCOPIC VS OPEN CHOLECYSTECTOMY IN MONGOLIA

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BACKGROUND

Laparoscopic cholecystectomies are generally safer and more cost-effective than open cholecystectomies in high-income and many middle-income countries.1-5

In Mongolia:
- 40,000 travel abroad yearly for healthcare6
- Training courses have helped expand access to laparoscopy despite limited resources2,4
- 58% of cholecystectomies performed were laparoscopic procedures in 20135

However, surveyed data such as quality of life, direct and indirect costs, and complications on laparoscopic and open cholecystectomies are rare in developing countries such as Mongolia.

PURPOSE

Study the cost effectiveness of laparoscopic vs open cholecystectomy in Mongolia, a lower-middle income country.

METHODS

Participants
- 199 Nonpregnant patients, ages 18+
- 7 participating Mongolian hospitals

Data collected
Demographics, medical history, type of surgery, complications, length of stay, cost of care

GIQLI & EQ-5D-3L QoL Questionnaires
- Pre-op appointment
- 4 weeks post-op

RESULTS

The overall percentage of cholecystectomies performed laparoscopically in this study (56%) is similar to countrywide percentage in 2013.

However, this study was only conducted at 7 Mongolian hospitals, and it is likely that the actual percentage of laparoscopic cholecystectomies performed annually is higher as a result of increased training opportunities and patient access throughout Mongolia.

Future studies with larger samples are needed to trend complication rates.

Shorter interval follow-up surveys at 1 or 2 weeks are necessary to capture intermediate-term quality of life and complication outcomes.

CONCLUSION/DISCUSSION

The overall percentage of cholecystectomies performed laparoscopically in this study (56%) is similar to countrywide percentage in 2013.

However, this study was only conducted at 7 Mongolian hospitals, and it is likely that the actual percentage of laparoscopic cholecystectomies per annum is higher as a result of increased training opportunities and patient access throughout Mongolia.

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DATA SUMMARY/RESULTS

EQ-5D-3L Index Score Interpretation: 0 = Death 1 = Perfect Health
Total Costs = Patient + Insurance Inpatient and Outpatient Costs

Cost-Effectiveness Analysis and Results Pending

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References