

Zusammenfassung der Master-Thesis von
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The Management of Distal Radius Fractures in the Swiss Working Population: Epidemiology and Costs

Background

The aim was to describe the epidemiology of the treatment of distal radius fractures in patients insured by Suva, to analyse variations between regions and types of hospital and to examine costs and time-off work aspects.

Methods

324 patient-records were included in the study. To address the study objectives, standard descriptive statistics and regression modelling were applied. Primary outcomes were i) manner of treatment (conservative or surgical), ii) time-off work, and iii) costs. For each of these outcomes a multiple regression model was developed.

Results

For surgical treatment three predictors could be found: Type of fracture, fragmented fracture and initial point of care in a public hospital. The duration of time-off work was associated with surgical treatment, patients coming from South-East Europe or South, age and residence in the French/Italian Part of Switzerland. The predictors for costs were surgical treatment, initial point of care in a Public Hospital or in a Private Clinic, patients coming from South-East Europe and age.

Conclusions

The differences between nations/residence were not explicable by medical reasons. They could possibly be explained by socio-cultural factors, the domain of immigration and the associated problems.

The control of the case-mix was not possible due to the lack of precise classifications of the fractures. A differentiated analysis of the practice patterns as well as the costs/time-off-work is only possible, if the classification of the fractures is systematically done. The ICD-classification is not sufficient to predict time-off work periods, costs and IE; additionally, the ICF should be applied