One Night Hospitalization Following Open Radical Retropubic Prostatectomy: A Safe and Cost Effective Approach

Introduction and Objectives: To evaluate one night hospitalization after radical retropubic prostatectomy (RRP) as a safe, feasible and cost effective strategy.

Materials and Methods: Between November 2009 and March 2011, 100 patients with clinically localized prostate cancer underwent open RRP. These patients were discharged one night after surgery and clinical and demographic characteristics, hospital costs, peri and post operative complications (during first 30 days) and readmission rate were analyzed.

Results: The mean patient age and weight was 60.8 (40-73) years old and 73.6 kg (55-115), respectively. Mean operative time (excluding anesthesia time) was 96.8 (55-155) minutes. There were 29 cases (29%) who required blood transfusion (one packed RBC in 14, 2 packed RBC in 13 and 3 packed RBC in 2 cases). The mean hospital stay was 1.19 days and 94(94%) patients were discharged after one night's admission. Anemia due to peri- operative bleeding (two cases) and acute myocardial infarction after surgery in one patient were the causes of prolonged hospitalization (more than two days). No major surgical complications (≥ grade III clavien classification system) happened during first 30 days after surgery. Discharge of the patient one night after surgery reduced 71% of the mean cost per day per case. Conclusion: One night hospitalization after RRP does not adversely influence the quality of care and short-term surgical outcome and can be assumed as a safe, feasible and cost-effective protocol.