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**THE REASONS OF DAMA (DISCHARGE AGAINST MEDICAL ADVICE):
 A CASE STUDY AT SUYUDI HOSPITAL, LAMONGAN,
 EAST JAVA, INDONESIA**

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Abstract

A lack of health service at any hospital will cause the illness to be more serious that it will make the medical cost raising. The purpose of the study aims at knowing of the reason why clients do discharge against medical advice (DAMA) at Suyudi Hospital, Lamongan. This study is based on cross sectional design by taking sample of all patients who do DAMA at ward at Suyudi Hospital from January-April 2017.

The reason of DAMA is divided into three factors: (i) patient's factor; (ii) hospital environment factor; and (iii) medical staffs factor. There are 99 cases (9,5%) from all the clients do DAMA. From the observation, it is found that the main reason of DAMA case is patient's factor (68,7%), then followed by medical staff factor (18,2%), and eventually hospital environment factor (13,1%). At a comparison with minimum standard service at entire Indonesian hospital, the DAMA case at Suyudi Hospital is higher.

Keywords: DAMA, Reason, Patient, Hospital, Medical staffs.

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Introduction

The good service at hospital becomes new hope for a society to help them to solve their health's problem. The good service will help patients to make their length of stay at hospital shorter, so that they will have chance to create their more productive time. Yet, if hospital's service is bad, it causes additional time of stay, in that it leads the decline of their productivity. Therefore, I suppose, hospital has a strategic role to offer prime and excellent service that suits the applied standard of service.

The DAMA cases at hospital always link with the increase of morbidity and risk of readmission. There are also many studies try to find out causes of Discharges against Medical Advice. In addition

to that, data from the other countries report that this case often happens too.¹

Several cases of DAMA at some hospitals in Iran as reported by Emergency Hospital Department of Iran's Education in 2013 stated that from 121 cases (5,6%) patients do DAMA, 43,9% related to patients' factor, 41,2% related with hospital's environment, and 35,2% related to medical staff. 65,9% (80 cases) from all cases stated they do not get any information or less of information about the problem happen after DAMA.²

All medical staffs at hospital have responsibility to offer good service to patient begin from the first day they were admitted until the treatment finish.

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This DAMA has relation with medical staffs at increasing the risk of un-ended treatment and healing patient.³ In regard with DAMA effect, a research shows that DAMA cases cause to death is 16% from all admission.⁴

DAMA also increases readmission.⁵ Readmission at hospital to patient with DAMA will increase if patient's condition is unstable.⁶ The result of a retrospective study to 181.516 DAMA patients for 2 years shows that a death and readmission cases are about 40% compared with patients who complete their treatment at hospital.⁷

DAMA can also increase medical cost to 56%. A study in Australia shows that readmission cost can reach 8,6 million USD per year.⁸ Even if DAMA has bad influence, this issue still remains unsolved at health system.⁹

Material and Method

This study is based on the cross-sectional design. It is conducted at Suyudi Hospital, Paciran Lamongan East Java Indonesia. Respondent of this study is all patients who have DAMA at ward from January-April 2017. Data of DAMA of this study is found from patients' medical record who do DAMA at Suyudi Hospital.

Result and Discussion

Suyudi hospital is a private hospital in Paciran, Lamongan. It has 55 beds consist of wards and High Care Unit. As for specialist medical service at Suyudi hospital, Suyudi has lack of service due to lack of specialist doctor. This condition brings for a bad medical service at hospital, particularly for people who needs to rest at ward. In addition, this problem is also unable to be handled by first level of medical healthcare service. Eventually, this situation leads to several reasons why many patients feel that they do not get their best services, and so that they force themselves to do DAMA.

In linkage with DAMA patients from 2014 until April 2017, below is a table shows data:

Table No. 01: Amount of DAMA patients based on the health insurance at ward at Suyudi Hospital, Paciran Lamongan (2014 – April 2017).

Period (year)	Amount of admission		Total admission	Total DAMA	Perce ntage (%)	Cost model			
	Without Assurance	With BPJS assurance				Not assurance		BPJS	
						N	%	n	%
2014	794	327	1.121	54	4,8	50	92,6	4	7,4
2015	1.265	837	2.102	102	4,8	86	84,3	16	15,7
2016	1.840	1.829	3.669	196	5,3	149	76,0	47	24,0
January – April 2017	419	626	1.045	99	9,5	73	73,7	26	26,3

Source: Medical record department at Suyudi hospital, Paciran, Lamongan.

The table no. 01 shows that DAMA cases happen between January-April 2017 with percentage of 99 cases (9,5%).

According to standard of minimum service at hospital, the DAMA case must not exceed above

5%. In Suyudi Hospital's case, the number of DAMA takes beyond the minimum amount of the standard, happened between January to April 2017.

Additionally, the table below shows DAMA case, according to gender, age, LOS, and cost at hospital.

Table No. 02: Distirbution of DAMA according to gender, age, and cost at hospital, readmission case and quite to other hospital at Unit Rawat Inap Suyudi Hospital, Paciran, Lamongan for January – April 2017.

S. No		Total admission		Total of DAMA patients			
		Without assurance	With BPJS	Without assurance		With BPJS	
		N	N	n	%	n	%
1	Sex						
	Male	223	360	43	43,4	11	11,1
	Female	192	270	30	30,3	15	15,2
2	Ages						
	0-5	82	110	5	5,0	2	2,0
	6-19	41	62	14	14,1	1	1,0
	20-55	105	250	24	24,3	8	8,1
	>55	174	221	30	30,4	15	15,2
3	LOS						
	1-3	180	265	38	38,4	10	10,1
	4-6	183	282	32	32,3	15	15,2
	7-10	54	81	3	3,0	1	1,0
4	Cost at Hospital						
	< Rp 2.000.000	33	290	18	18,2	12	12,2
	Rp 2.000.000 – Rp. 4 000.000	103	212	40	40,4	9	9,1
	>Rp 4.000.000	282	125	15	15,2	5	5,1
5	Readmission Cases	100	9,5	24	24,3	9	9,1
6	Going to other Hospital	6	0,57	6	6,0	0	0

Source: Medical record department at Suyudi Hospital, Paciran, Lamongan.

Table no. 02 shows the distribution of DAMA according to gender, age, length of stay, cost, readmission and quite to other hospital from both without assurance patients and with BPJS assurance. From 1.045 patients of DAMA, 99 of them do DAMA as several reasons. If paying attention to gender point, most DAMA cases happen to male, and for the age happen to those who >55 years old. According to treatment's time almost of them are being treated for 1-3 days. And for cost of their treatment it is around Rp. 2.000.000 – Rp. 4.000.000.

Cutting their treatment in the middle of treatment will effect on utilization of service, examination,

and all the procedure must be began from the first step again like procedure to diagnose new patients. This will cause the increasing of medical treatment's cost, evaluation system to any disease (the contagious disease has a risk to spread to other people). Readmission risk will cause to over of utilization, whereas the cost of treatment will be expensive because the procedure of the service must be repeated from beginning.

In high cases of DAMA, it can't be separated also from the condition of the patients itself. Here are 5 analysis of reason why patients do DAMA at Suyudi Hospital, Paciran, Lamongan from January – April 2017.

Table No. 03: List of 5 diagnoses of almost DAMA cases at ward Suyudi Hospital, Paciran, Lamongan from January – April 2017

S. No	ICD Code 10	Diagnose	Total Case
1	E14.9	Diabetes mellitus + complication	13
2	K29.7	Gastritis	11
3	I10	Hipertensi	8
4	A01.0	Typhoid Fever	7
5	D64.9	Anemia	4

Source: Medical Record Department of Suyudi Hospital Lamongan.

At DAMA case, the reasons that force patients to do DAMA become important factor. Here are the reasons which force them to go home rather than

continuing their treatment at Suyudi Hospital, Paciran, Lamongan from January – April 2017.

Table No. 04: Reasons of DAMA patients at ward of Suyudi Hospital, Paciran, Lamongan from January – April 2017.

Reason	Without Assurance		With BPJS		Total		
	n	%	n	%	n	%	
From Patients' Factors	Feeling better	7	7,1	4	4,0	11	7,1
	<i>Hopeless</i>	1	1,0	5	5,1	6	6,1
	High Cost	35	35,3	0	0	35	35,3
Hospital factor	Rejecting to refer	3	3,0	13	13,2	16	16,2
	Cleanliness	5	5,0	0	0	5	5,0
	Noisy	1	1,0	0	0	1	1,0
Medical workers' factor	Lack of facilities	7	7,1	0	0	7	7,1
	Communication of doctor-patient	4	4,0	0	0	4	4,0
	Knowledge and Skill	7	7,1	0	0	7	7,1
	Doctor's absent	11	11,1	0	0	11	11,1
Total		73	73,7	26	26,3	99	100

Source: Medical Record Department of Suyudi Hospital, Paciran, Lamongan.

Table no. 04 shows that reasons of DAMA patients almost are caused by their incapability of high cost.

Conclusion

Patients' decision to do DAMA will cause the increasing of treatment's cost, readmission case, and problem that happen within the patients or their families. DAMA cases at Suyudi Hospital, Paciran, Lamongan is relatively high. Therefore, the analysis may find 99 cases from January – April 2017 (9,5%) with the highest reason is expensive cost for non-assurance patients. From this study, I find data that leads to conclusion that by decreasing cost of treatment at hospital and optimizing of medical service is effort to reduce DAMA cases.

Acknowledgement

This research is conducted at Suyudi Hospital, Paciran Lamongan, from January-April 2017. I used combination of method to do this research, that is using medical record and literature review. I conduct this research due to several reasons. First, to find data why DAMA often happen at Suyudi Hospital. Second, to find on how Suyudi Hospital often the services to the patients. As for this second reasons, I would like to know the linkage between the DAMA cases and offering services at the hospital. I would thank to several people who have helped and assisted me to do this research.

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