

AS IT IS

High Patient Death Rates after Operations in African Hospitals

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A new study shows that patients in African hospitals are two times as likely to die after doctors operate as the average death rate worldwide.

More than 30 African researchers worked on the study. They examined records for all operations performed during a one-week period at 247 hospitals in 25 African countries.

The researchers noted that while African patients were usually younger and at lower risk than average, 1 percent died of problems after elective **surgery**. The death rate worldwide is 0.5 percent.

Bruce Biccard of the University of Cape Town was the lead writer of the study. He said, "It's really concerning when you see how high the **mortality** is, considering that the patients are generally **fit** and they're having a lot more minor surgeries."

Biccard and the other researchers wrote that workforce and **resource** shortages across Africa are likely to affect patient deaths. Their findings were published in the journal *The Lancet*.

The study found a severe shortage of African surgeons, **obstetricians** and **anesthesiologists**. Earlier research showed that fewer patients die after surgery when there are 20 to 40 specialists per 100,000 people. The new study found that Africa has an average of less than one specialist per 100,000 people.

In addition to the high death rate, the report said, "the most alarming finding was how few people actually received surgery." Experts have estimated that 5 percent of the population needs surgery in a year. African hospitals on average performed less than one-twentieth of that number.

The report noted that patients were receiving surgery later in the **course** of their diseases. Nearly 60 percent of the operations were **urgent** or emergency treatments. In industrial countries, the rate is about 25 percent.

Most of the patients who died did so in the days after their surgery, not during the operation.

Biccard said, "We're actually failing to recognize patients who are having **complications** in the post-op period. So a minor complication becomes a major complication."

Biccard noted that increasing the number of doctors is an unlikely short-term solution. His group is working on a method "that will tell us before surgery which patients we think are going to get into trouble."

The group is planning another study in 2019.

I'm Jonathan Evans.

Steve Baragona reported this story for VOANews.com. Jonathan Evans adapted his report for Learning English. George Grow was the editor.

Words in this Story

anesthesiologist – *n.* a doctor who specializes in administering drugs that cause a person to lose feeling and to feel no pain in part or all of the body

complication – *n.* disease or condition that happens in addition to another disease or condition; a problem that makes a disease or condition more dangerous or harder to treat

obstetrician – *n.* a doctor who specializes in a branch of medicine that deals with the birth of children and with the care of women before, during, and after they give birth to children

urgent – *adj.* very important and needing immediate attention

surgery – *n.* a medical operation performed by a doctor or team of doctors

mortality – *n.* the number of deaths in a given time or place

fit – *adj.* being physically or mentally able

resource – *n.* a supply of something; the ability to meet and deal with something

course – *n.* movement from one point to another; an orderly series of actions
