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Critical Care

COST-BENEFIT IN THE CRITICALLY ILL Increasing amounts of medical resources are being devoted to the care of the critically ill. What can be learned from an objective evaluation of the costs and benefits involved in this area? The authors report data derived from the consecutive treatment of 226 patients during a year. The average duration of hospitalization was 35 days. At the end of a month, 123 patients (54 per cent) had died. Of patients surviving a month, almost a third had returned home. The remainder progressed in two different ways: some showed gradual improvement to full recovery, while others declined and died within the year. At the end of a year, 164 patients (73 per cent) had died. Evalua-

tion of all patients surviving during the first year showed that 26 (12 per cent of the entire study group) were functioning normally. This had been accomplished at a total hospital cost (excluding physician fees) of \$3,232,647. The cost of blood and blood products represented 21 per cent of the total cost. The authors conclude that the data "document the use of increasingly limited resources in the management of critically ill patients. The medical profession must make difficult decisions to allocate these resources effectively." (Cullen DJ, and others: *Survival, hospitalization charges and follow-up in critically ill patients.* *N Engl J Med* 294: 982-987, 1976.)