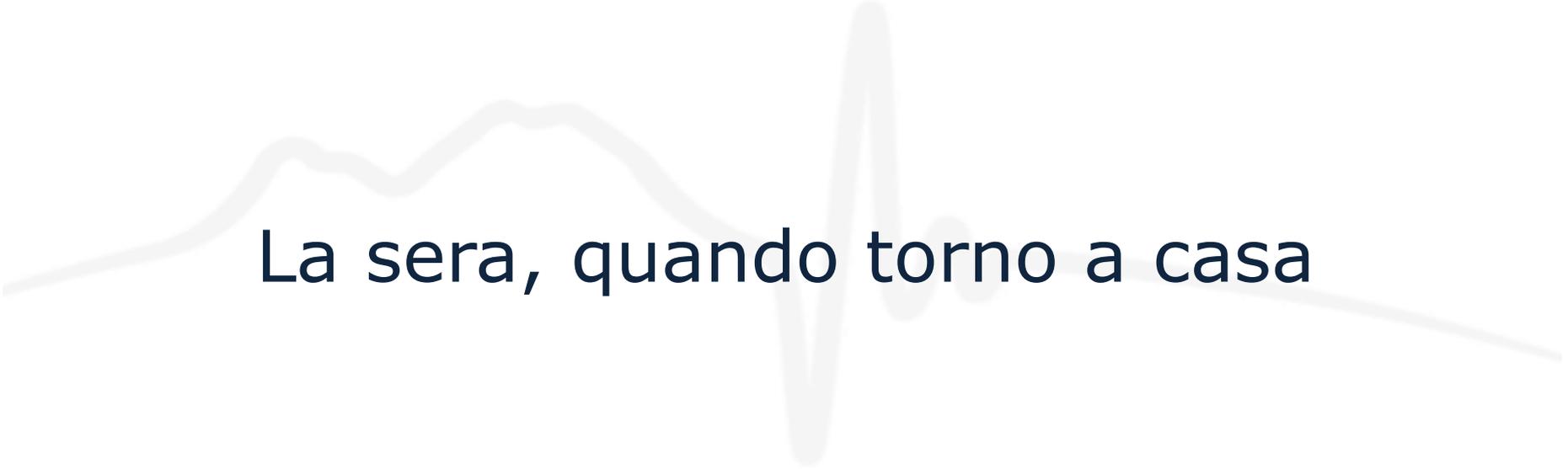


# Quando il rimedio è peggiore del male

NAPOLI 20\_11\_2016



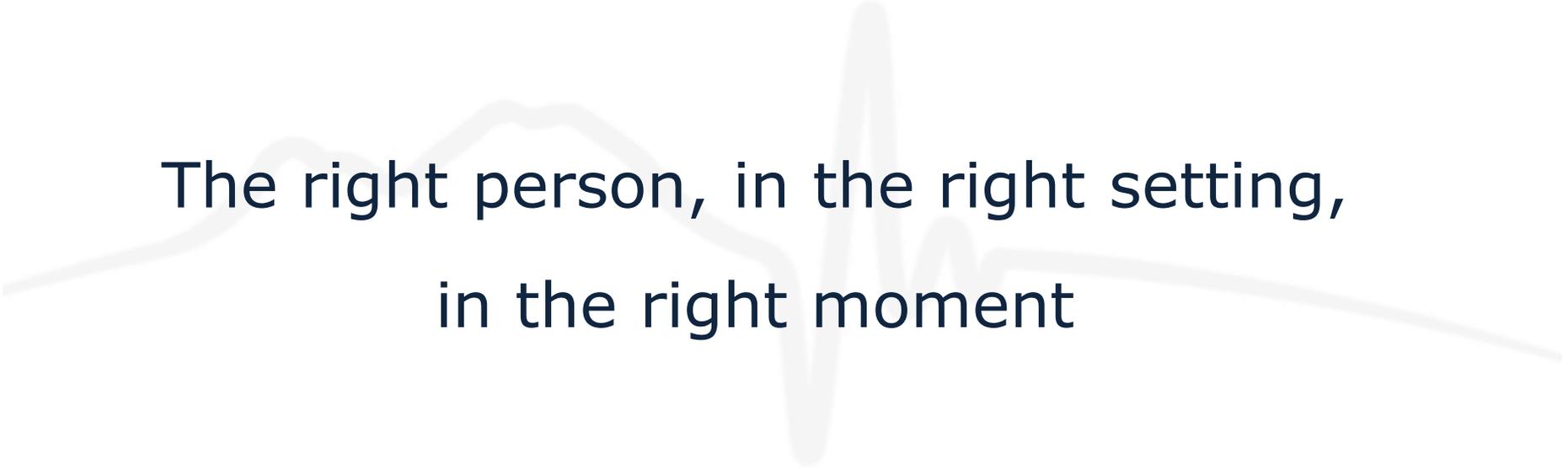


La sera, quando torno a casa

Dalla "Fetida sentina dell'Ospedale"  
a George Clooney  
(o, se preferite, a Fabio De Iaco).

Recognize those patients **who will benefit from inpatient care**, and to effectively implement outpatient care to those **who do not require inpatient resources.**

ACEP 2013



The right person, in the right setting,  
in the right moment

Report of the Acute Care Task Force  
Royal College of Physicians  
October 2007

We should be aware that the decision to admit a patient is sometimes part of a **defensive strategy** and responds to a need for **protecting the physician** rather than the ill person.

European Journal of Internal Medicine, (2015) 26;7: 476-477

Any hospital admission implies an admission of another sort: an **assumption of responsibility towards the patient** in all stages, from acceptance to discharge.

European Journal of Internal Medicine, (2015) 26;7: 476-477



# There's No Place Like Home

Moore, Chest. 2007 Jul;132(1):7-8

When the **ED is crowded**, the overall culture of the **whole hospital changes.**

Inpatient floors feel the pressure to admit more patients, so they **discharge patients before** they would have done so otherwise.

NICE 2007 Acutely ill patients in hospital

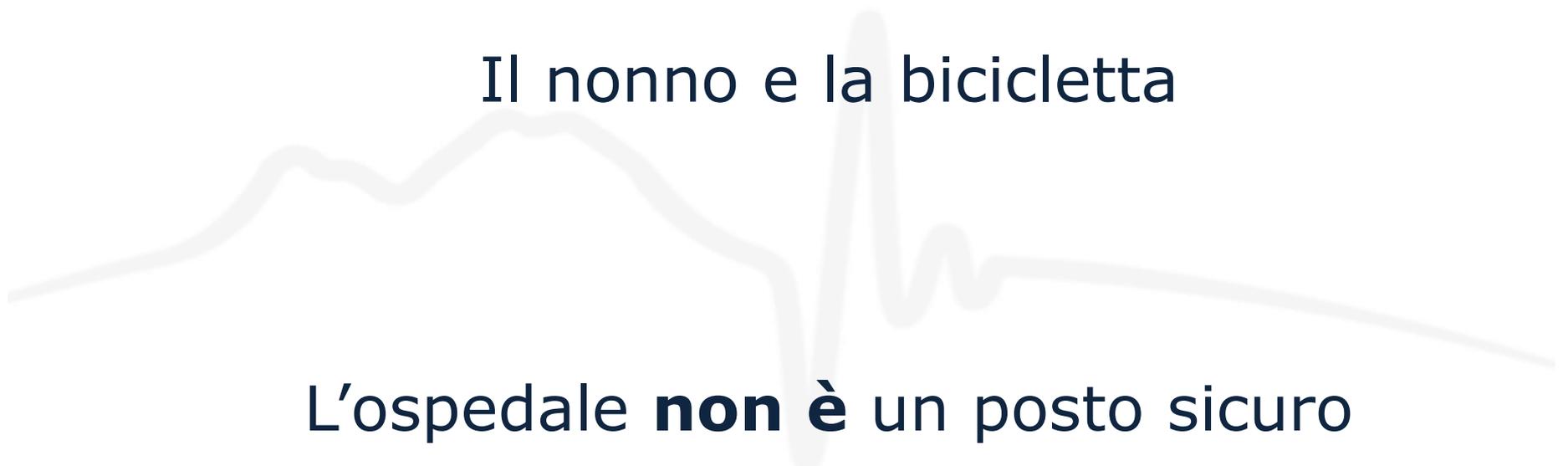
Emergency care needs to be managed so that **emergency admissions do not constantly interfere with planned admissions.**

Admission **wards** would **need to be flexible** and **staffed to cope with variable pressures,** thus reducing pressure on the speciality wards.

Inappropriatezza del ricovero

Sicurezza di un ricovero appropriato

Inappropriatezza della degenza



Il nonno e la bicicletta

L'ospedale **non** è un posto sicuro

Patients who are admitted to hospital believe that they are entering **a place of safety**, where they, and their families and carers, *have a right to believe* that they will receive the **best possible care**. They feel confident that, should their condition deteriorate, they are in **the best place** for prompt and effective treatment.

Yet there is evidence to the contrary.

NICE 2007 Acutely ill patients in hospital



# L'aria dell'Ospedale

Hospital air is a potential route of transmission of BLRB, such as Acinetobacter and Staphylococcus, two important causative agents of nosocomial infections.

S.H. Mirhoseini et al. / American Journal of Infection Control (2016)

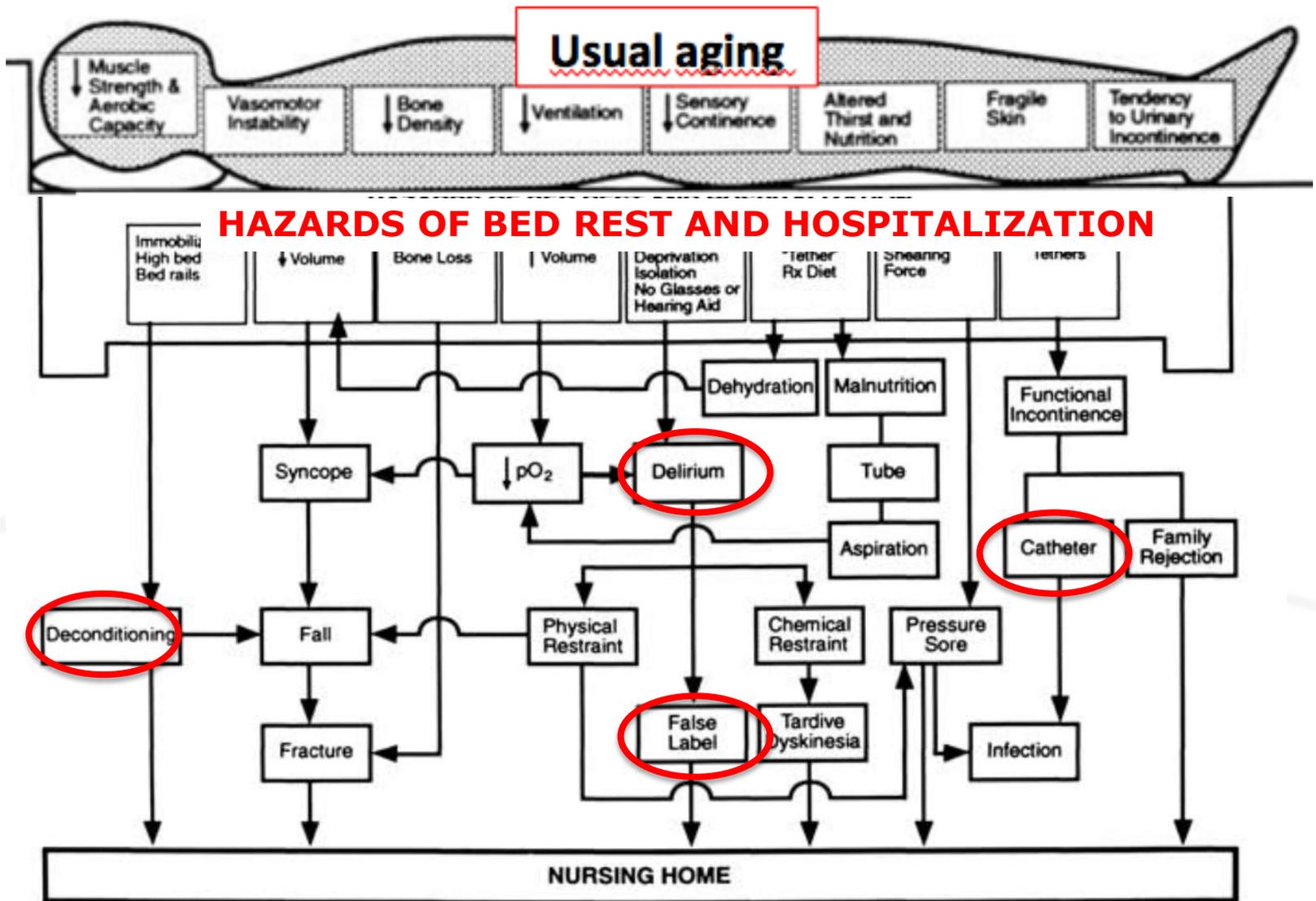
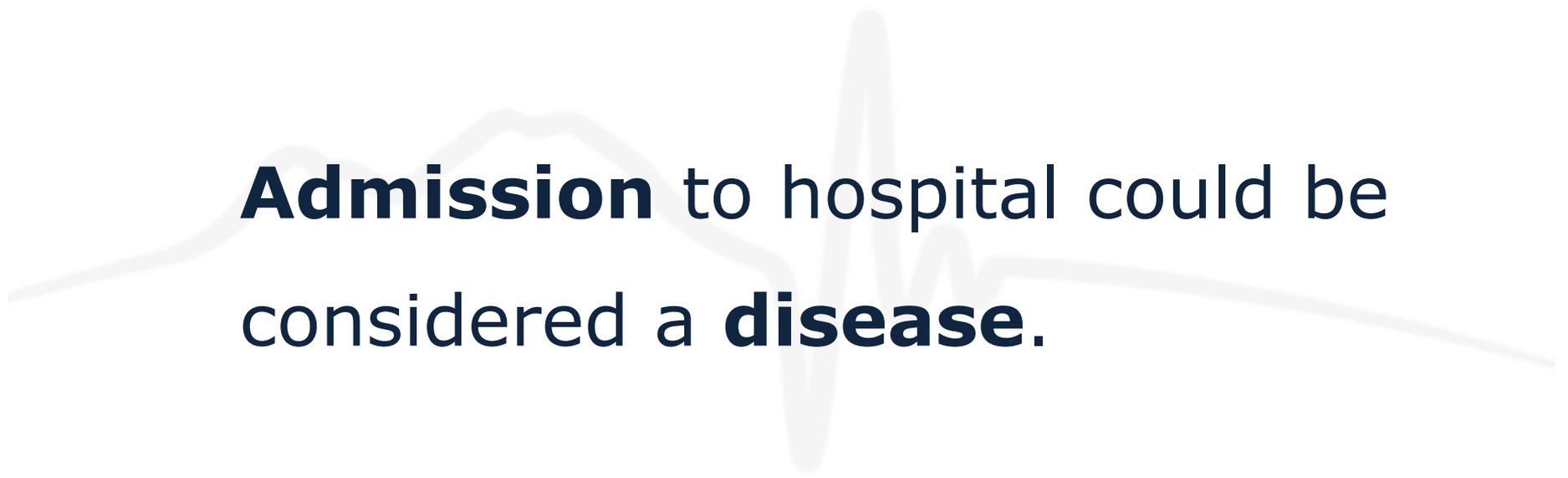


Figure 1. The cascade to dependency.

## The cascade of dependency

- removal from **one's own world**,
- interruption of **habits**,
- disorientation by dealing with **different doctors** and nurses,
- **immobilisation** and malnutrition,
- **sleep** deprivation,
- addition of new **medications**,
- the well-known risk of hospital **infections** and
- other **iatrogenic damages** such as **delirium**,



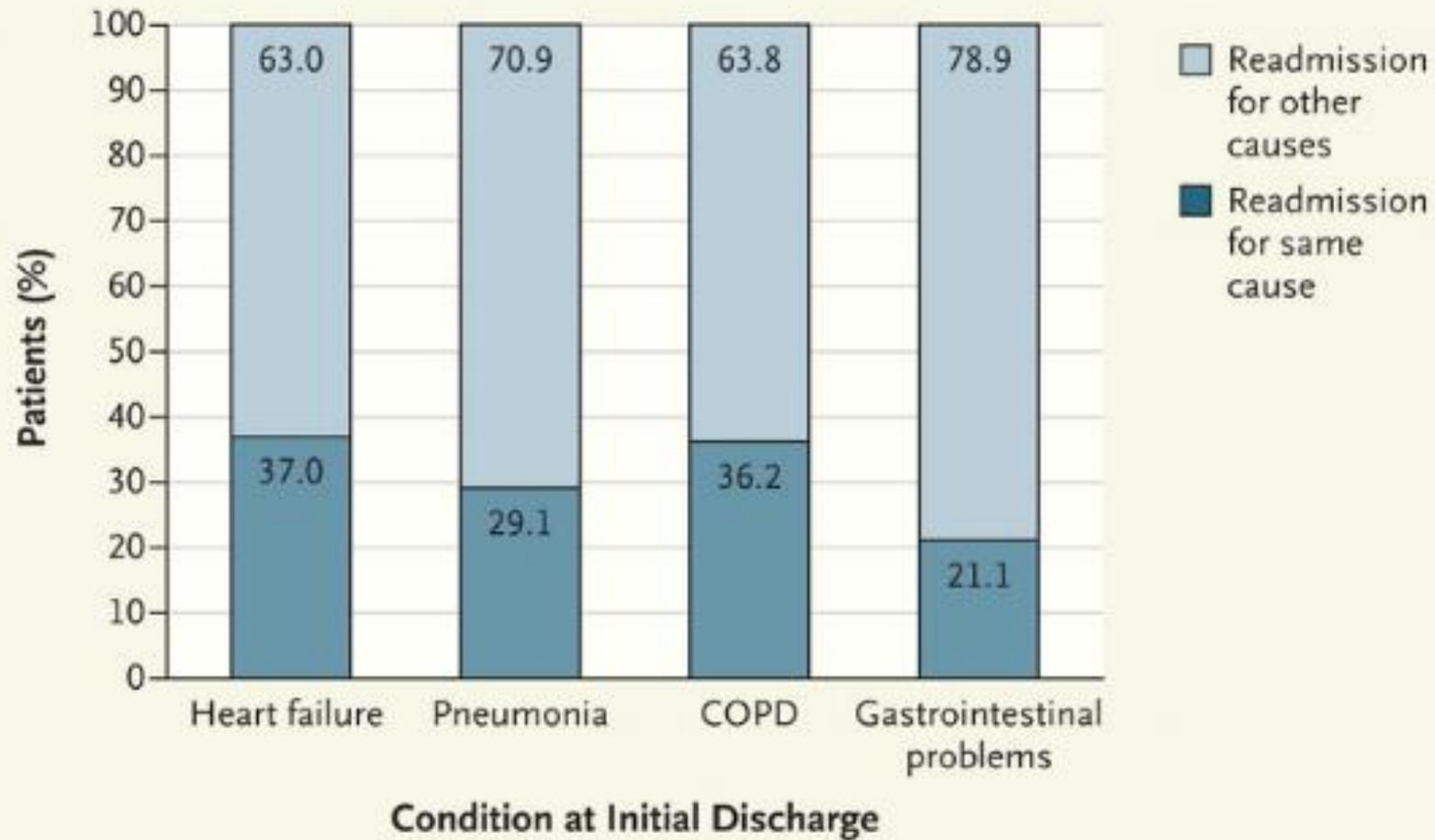
**Admission** to hospital could be considered a **disease**.

McIntyre H. BMJ 2013;346: f3242.

# Post-hospital syndrome

— an acquired, transient condition of generalized risk.

Krumholz HM. N Engl J Med 2013;368:100–2



**Functional status** near the time of discharge from an acute care hospital is **strongly associated with acute care readmission**, particularly for medical patients with greater functional impairments.

**Reducing functional status decline** during acute care hospitalization may be an important **strategy to lower readmissions**.

**Bed rest** has been demonstrated to make young men lose muscle strength at a rate of **1%-1.5% per day**, and this percentage dramatically increases in older patients.

Ziesberg AJ Am Geriatr Soc. 2015;63:55e62.

The underrecognized **epidemic of low mobility** during hospitalization of older adults.

Brown CJ, et al. J Am Geriatr Soc 2009;57:1660–1665

"I need Dad to walk again if I am to  
take him home,"

versus

"We have treated his pneumonia and  
now it's time for him to go."

Ann Emerg Med 2008

Patients admitted to **larger hospitals** were at **higher risk** of developing hospital-acquired functional decline.

The increased amount of **total daily care** in minutes and the increased proportion of care offered by **graduate nurses, prevent functional decline.**

**Competent nursing care** acknowledges older patients' abilities and **promotes physical activity** rather than performing the tasks for the patients.

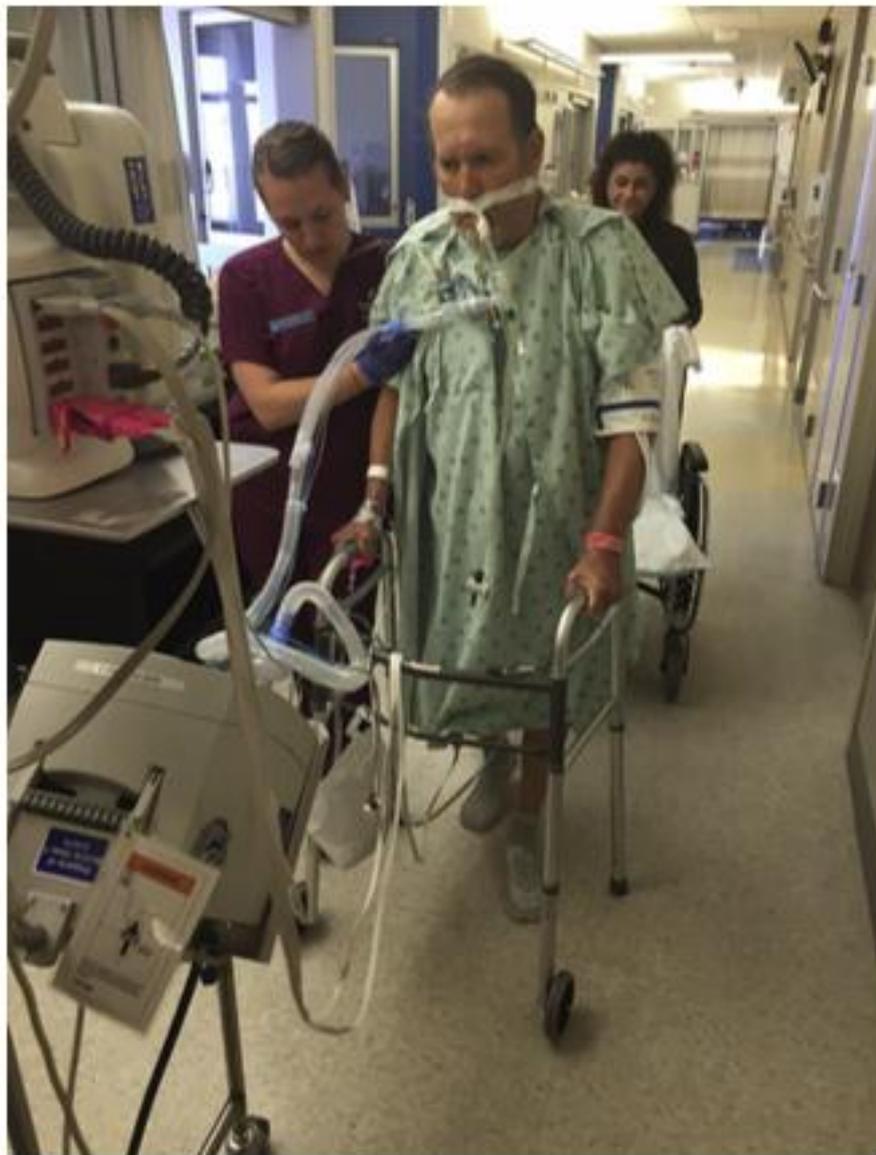


Figure 1 – *Photo showing a patient receiving mechanical ventilation via an endotracheal tube while ambulating in the ICU with a physical therapist. (The patient provided written consent for the use of this photograph.)*

In the medical units, nurses attend to 5–13 patients in the morning, 7.6–14.6 in the afternoon, and **12.3–30.5 during the night.**

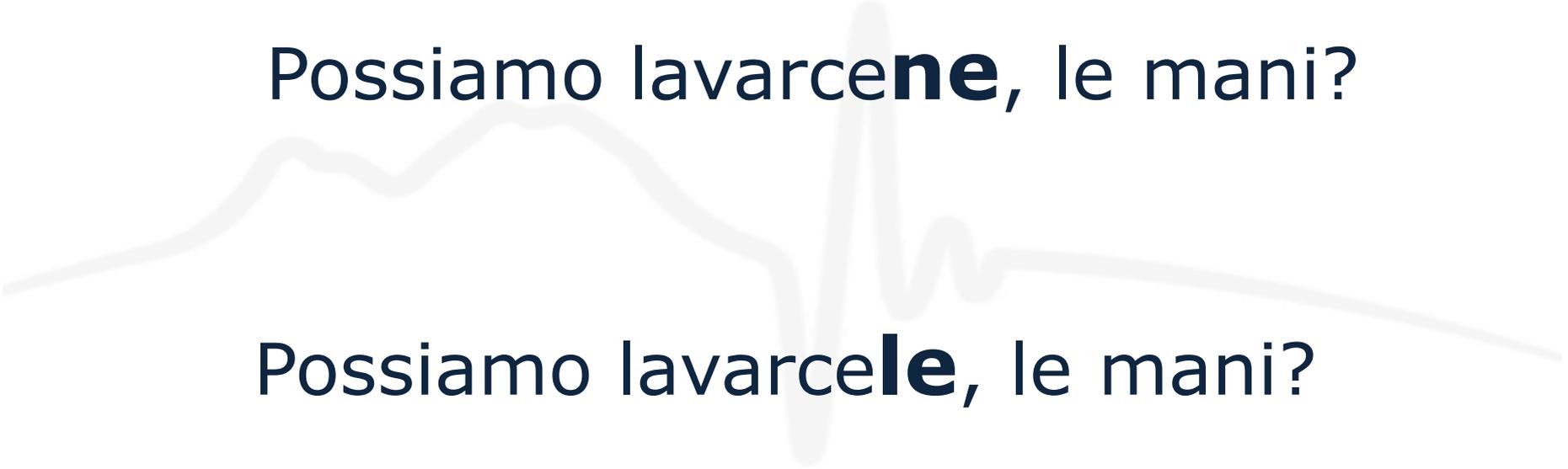
Palese A. et al. Aging Clin Exp Res (2013) 25:707–710





- austerity
- reduction in the number of nurses at patients' bedsides.
- negative results on patients.

Palese A, Watson R. Lancet. 2014 May 24;383(9931):1789-90.



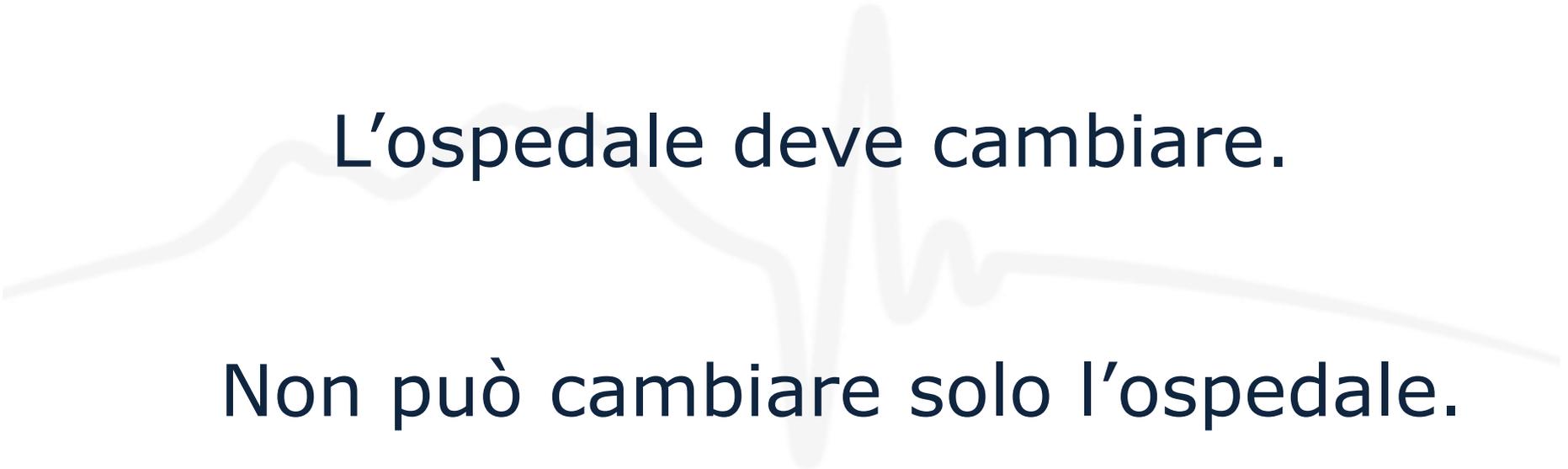
Possiamo lavarce**ne**, le mani?

Possiamo lavarce**le**, le mani?

# **Fundamental standards of care**

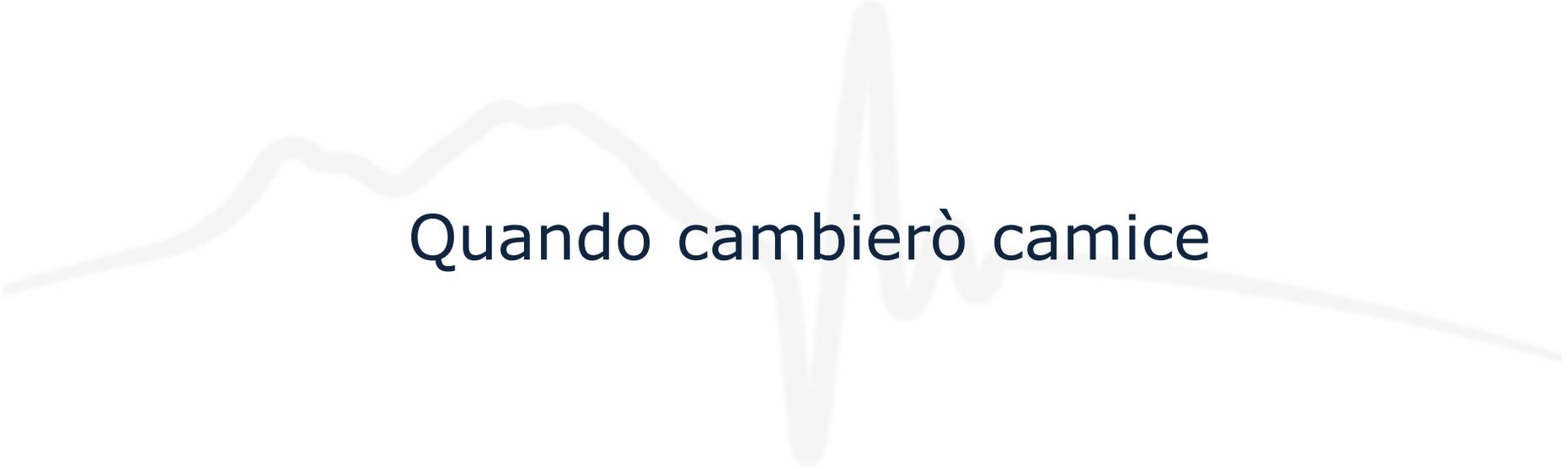
Patients **must**:

- i** be treated with **kindness, respect** and **dignity**, respecting privacy and confidentiality
- ii** receive physical comfort including effective **pain** management
- iii** receive proper food and **nutrition** and appropriate help with **activities** of daily living
- iv** be in clean and **comfortable surroundings**
- v** receive emotional support and **alleviation of fear and anxiety** about such issues as clinical status, prognosis, and the impact of illness on themselves, their families and their finances.



L'ospedale deve cambiare.

Non può cambiare solo l'ospedale.



Quando cambierò camice

Non possiamo continuare a  
cercare soluzioni organizzative a  
problemi culturali

No pasaran.

Pasaran (y ripasaran).

Ho freddo e fame, son poverina.

# La Carta di San Martino

Reflections in Internal Medicine

Reducing the risk of hospital admission: A call to action from the Italian Society of Internal Medicine☆

Rodolfo Sbrojavacca <sup>a,1</sup>, Antonello Pietrangelo <sup>b,1</sup>, Luigi Fenoglio <sup>c,1</sup>, Francesco Violi <sup>d,1</sup>,  
Francesco Perticone <sup>e,1</sup>, Gino Roberto Corazza <sup>f,\*,1</sup>

European Journal of Internal Medicine, (2015) 26;7:  
476-477



# A call to action