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Letter to the Editor

Reduction in length of stay of patients admitted to a regional burn centre during COVID-19 pandemic



Sir

Factors affecting the length of stay of among patients admitted to burn centres include severity of burn injuries, in-hospital complications. patients' comorbidities and socioeconomic status [1-3].

In this study, the effect of pandemic disease on the length of stay in hospital is explored. Due to COVID-19 pandemic, the government advised people to stay home. This retrospective study compared the hospital length of stay of patients admitted to a regional burn centre during six weeks of lockdown (23rd March – 6th May 2000) to the length of stay last year (23rd March – 6th May 2019). All patients were age 16 years or more; and there was no mortality in these periods. The healthcare is free.

During these six weeks of lockdown, we admitted 16 patients to the burn ward, with an average length of stay 0.68 days. Seventy five percent of patients sustained burn of 10% TBSA or less. The burn size of others was less the 40% TBSA. None of these patients had a positive COVID-19 test. During the same six weeks in the previous year, we admitted 32 patients, with an average length of stay 2.20 days. Ninety percent of patients sustained burn of 10% TBSA or less. The burn size of others was less the 40% TBSA.

Although we found a 68% decrease in length of stay during the lockdown period, there has been no report of post discharge problems. This was achieved by increase utilisation of outpatient care in the burns centre and our burns outreach nurse team for follow up and dressing at home. If a surgerywas indicatedfor a small burn, then patients were admitted for same day surgery and discharged.

The main reason of reducing the length of stay was to prevent unnecessary risk of COVID-19 infection to burned patients during hospital stay and at the same time reserve tertiary hospital resources during this pandemic. This change of practice will be continuously monitored to ensure a safe discharge of patients, while reducing the use of acute hospital beds.

Conflict of interest

I confirm that there is no Conflicts of Interest and there is no Source of Funding regarding the manuscript "Reduction in length

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