Study Finds 35 to 42 Percent Daily Cost Savings for Hospitals Using Flexi-Seal® Fecal Management System

PR Newswire

SKILLMAN, N.J., May 23, 2013 /PRNewswire/ -- A new study of the costs of managing fecal incontinence in intensive care units (ICUs) at two Canadian hospitals has found a 35 to 42 percent decrease in daily material costs with the Flexi-Seal® Fecal Management System (FMS) compared to the traditional use of bed pads, briefs and linens.

The study also showed potential additional health and economic benefits from avoiding pressure ulcers, a common complication of fecal incontinence, at the larger of the two hospitals. With the hospital's estimated treatment cost of CA$20,000 per case, potential additional cost savings per year for the hospital were estimated at nearly CA$8 million. Additionally, the smaller hospital in the study reported the use of Flexi-Seal® FMS saved valuable nursing time.

The results of the study, which was supported by ConvaTec, were published in the December issue of *Ostomy Wound Management*.

Based on the reductions in daily material costs, annual savings were projected at CA$627,095 for the larger hospital in the study. Annual savings on materials for the smaller hospital were projected at CA$57,216. Average daily material costs per patient ranged from CA$105 to CA$144 with traditional management, falling to CA$61 to CA$94 with Flexi-Seal® FMS.

Fecal incontinence, a common condition affecting patients in intensive care, places an economic burden on hospitals and carries significant risks to patients. Complications and harmful effects include skin breakdown and the development of pressure ulcers, as well as the spread of *C.difficile* and other dangerous "superbugs" through infectious diarrhea. New U.S. health care policies, tied to the Affordable Care Act, increasingly link hospital reimbursement rates to the ability to control such hospital-acquired infections.

With reporting of hospital-acquired conditions (HACs) such as pressure ulcers on Hospital Compare (hospitalcompare.hhs.gov) and the new Hospital-Acquired Condition Reduction Program coming into effect, hospitals are renewing their focus on prevention. Beginning in 2015, hospitals that rank among the lowest-performing 25 percent regarding HACs will have their reimbursement reduced by 1 percent.

In the study, the larger hospital reported a nearly 20 percent prevalence of pressure ulcers in patients with fecal incontinence when managed traditionally. By contrast, no pressure ulcers were reported in patients managed with Flexi-Seal® FMS.

The smaller hospital reported that daily nursing time per patient was reduced from nearly 6 hours (348 minutes) to 2 hours (120 minutes) – freeing up nursing time for other clinical priorities.

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