

Ambulatory surgery in Spain

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In Spain, ambulatory surgery (AS) is called major ambulatory surgery to emphasise that the focus is on procedures previously or still conducted in an in-patient setting with overnight stay, and that endoscopies and minor surgical excisions are excluded (these procedures were traditionally performed as office procedures). According to the guidelines on major ambulatory surgery produced by the Spanish Health Ministry in 1993, major ambulatory surgery is surgery performed under general, regional, sedation or local anaesthesia requiring neither intensive postoperative care nor overnight stay, the patients being discharged from the facility a few hours after the procedure.

Spanish background:

- Type of system: national health service (organized in 17 autonomous regions).
- Funding: 95% general taxation, 5% social security.
- Provision of services: hospitals, speciality doctors, and GPs.

Evolution of the health care in Spain:

- From centralized to decentralized structure.
- From public management to “private-like” management.
- From retrospective payment system to prospective payment system (DRGs).
- Accreditation systems of health institutions.

Day surgery was initiated in Spain in the early 1990s. Since then there has been a steady increase in day surgery activity with an average substitution index (number of day: case patients treated expressed as a percentage of the number of elective inpatients and day cases combined) of 35%. Some procedures such as cataract surgery have the highest indices; in contrast, only 20% of unilateral hernia repair are performed as day cases.

Because of the decentralizing structure of the Spanish health system there is not complete information at central government level about fundamental and simple data on AS. According to 2000 data from INSALUD, which grouped 7 out of the 17 autonomous regions and almost 40% of the population) the day surgery rate is continuously growing (although the impetus has diminished in the recent years) meanwhile the elective inpatient procedures have slightly decreased showing a limited evidence for substitution.

The most common way of providing ambulatory surgery in Spanish hospitals is to integrate the ambulatory patients among the other surgical patients of the different specialities. It is apparent that only 15% of hospitals with AS programmes have an autonomous day unit with dedicated operating theatres, recovery and reception areas. Forty-four percent sharing part of the resources with the general hospital. Forty-one percent integrate the ambulatory patients among the other surgical patients.

The pattern of hospital funding has been an impediment to a wider development of AS. The introduction in the late 1990s of changes in the financial mechanisms of hospitals has also favoured the trend towards more day case surgery.

- AS is a generalized practice in Spain. There is still great potential for an increase in day surgery in Spain at present with great variability among geographical areas, just as there is in the professional’s different attitudes.
- AS for many processes should be considered as first choice surgery and cease to be an alternative.
- The future of AS in Spain must concentrate on quality, improved efficiency, research and education programmes.

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