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P0372 - 30-DAY MORTALITY AND SURVIVAL IN ELDERLY PATIENTS UNDERGOING NEUROSURGERY

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Resumen

Objectives: The aim of the current study is to investigate 30-day mortality and survival in a cohort of elderly patients following emergency and elective neurosurgery. **Design:** Retrospective cohort study. **Subjects:** Patients greater than 70 years admitted to our neurosurgery department between April 2015 and April 2016.

Methods: Online patient electronic records were retrieved to gather information. Logistic regression analysis was used to identify predictors of mortality.

Results: 388 patients in total of whom 318 were 80 years (group A) and 70 were > 80 years (group B). Male: Female 1/4 1.2:1. 160 elective and 228 emergency admissions. Overall 30-day mortality = 7.5% (14.3% in group B). Mean survival (95% confidence interval) in group A compared with group B = 497 days (477-516) vs 435 days (383-488) ($p = 0.014$). Overall cumulative survival at one year was 84%. There was a significant difference in cumulative survival at one-year between elective (95%) and emergency (77%) patients. 81% of patients were discharged back to their usual place of residence (this figure was 60% for group B and 70% for emergency patients). Cranial tumour and vascular diagnosis were diagnostic categories that were independent predictors of mortality ($p = 0.001$ and $p = 0.01$ respectively).

Conclusions: Current selection of elective and emergency elderly patients (including those > 80 years) undergoing neurosurgery is associated with a low 30-day mortality and 1-year survival and a high rate of discharge back to previous residence.