A longitudinal analysis of wait times in a publicly funded, regionalized bariatric care system

Abbreviated Title: Longitudinal bariatric outcomes

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INTRODUCTION

The combination high demand and high costs can result in increasing wait times for bariatric surgery. Understandably, long wait times puts patients at a significantly increased risk of mortality and a decrease in mental and physical well-being. Few studies to date have evaluated the reasons associated with prolonged wait times and the objective of this study is to characterize wait-times within the Ontario Bariatric Network.

METHODS

This was a population-based study of all patients aged ≥ 18 years who received bariatric surgery in Ontario from April 2009 until December 2016. The registry data were linked to various administrative databases within Ontario that capture demographic variables as well as all healthcare utilization within the province. The main outcome of interest was length of wait times in days from referral until surgery. Univariable analysis of wait time factors was achieved with ANOVA.

RESULTS

Overall wait times continually increased every year of the study from 229.74 ± 100 days for patients receiving surgery in 2010/2011 to 387.64 \pm 192.65 days in 2016 (p<0.001) with median wait times of 212 (IQR 162-286) and 376 (IQR 256-470) days, respectively. Furthermore, wait times varied significantly by region. The highest average wait time for a region in 2016 was 470 \pm 149 days and the lowest was 229 \pm 136 days (p<0.001).

CONCLUSION

Wait times increased substantially throughout the course of the study. They also varied substantially by region. Further study is required to better understand the reason for such wide variation by region.

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