

Containing SARS outbreak cost single Toronto hospital \$12 million: study

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TORONTO (CP) - Containing SARS in a single Toronto hospital cost \$12 million in excess labour, lost revenues and additional spending for infection control materials, a study released Monday reveals.

The finding neatly underscores a point infection control experts struggle repeatedly to bring to the attention of budget masters and the public: **If hospitals don't spend modest sums to keep pathogens out of their facilities, they will end up spending big ones to contain them once they get out of control.**

"It's a true fact: **It's always cheaper to prevent than to deal with outbreaks. Much cheaper,**" said Dr. Allison McGeer, head of infection control at Toronto's Mount Sinai Hospital.

The study was published in the latest issue of the Canadian Journal of Public Health.

The authors, from Toronto's University Health Network, calculated costs to that hospital of caring for 33 SARS patients during the eight weeks that made up the first of two waves of SARS to hit the city in the spring of 2003.

Though UHN, as it's known, did not have one of the heaviest SARS patient loads of Toronto hospitals, it like others was forced to cut all but essential services. As a result, it lost hundreds of thousands of dollars worth of revenue when it suspended transplant programs and cardiac surgery, among other things.

"The point we wanted to make was that this was more generic than just SARS," said Dr. Michael Gardam, director of infection prevention and control at UHN, and senior author of the paper. **"The costs are from SARS but any serious outbreak where you do this sort of thing is going to have this kind of impact."**

"Certainly in Ontario we have the idea that if something bad came again we would potentially dust off the old SARS directives and give it a go a second time.

"And the only point we wanted to make - we're not saying whether these control measures were good or bad - we're saying, 'What we did cost more money than you might think.' "

The \$12-million figure included the cost of salaries for non-essential staff sent home with pay, overtime for those who continued to work, and salaries for additional personnel hired to do SARS screening at hospital entry points.

The total does not include the wages hospital-based doctors lost because they were not seeing patients or performing surgeries.

Other costs included additional isolation gowns and masks, renovations needed to safely accommodate SARS patients, and lost revenues from retail establishments - restaurants and gift shops - located in hospitals.

"There's that impact that you don't think of," Gardam said. "And hospitals plan their budgets around, 'We're going to get X per cent from the revenues from the Tim Hortons or whatever.' "

McGeer, who was not involved in the study, questioned some of the calculations, such as the salaries for workers sent home with pay.

"They would have paid them anyway," she pointed out. "It's not additional costs."

And she noted the calculations cannot be extrapolated across all the hospitals that cared for SARS patients, because some don't run the highly specialized programs that UHN does.

"It would be different for each hospital."

Gardam agreed, but added hospitals that looked after more SARS patients over the full four months of the outbreak would have had greater costs on that part of the equation.

"This would have been far worse at North York General or Scarborough Grace," he said, referring to the hospitals that were the nexus of the second and first waves of SARS respectively.

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