Letters to the Editor

Alternatives to hospital care

SIR—The recent Age and Ageing supplement ‘Alternatives to Hospital Care’ is timely and makes an important contribution to the literature and debate on the subject.

We believe that authors of review articles should give details of the search methods used so that the reader can be informed about the completeness of the search strategy employed. The article on community outreach rehabilitation sought to review randomized controlled trials which had been published in the last 10 years [1]. However, a number of studies were not included, as only 9 studies which evaluated generic services and specialist services for stroke and orthopaedic patients were identified. The review did not include published evaluations of early supported discharge for stroke patients which were undertaken in Adelaide, London, Montreal, Oslo, Newcastle and Stockholm (which are summarized in a Cochrane Review [2–13]). Early supported discharge after stroke can significantly reduce length of stay without apparent adverse effects on patient outcomes. However, there are potential adverse outcomes: in one study, levels of carer stress were higher in those who receive the supported discharge service [10]. It is important that clinical services which are developed have similar staffing and resources to those which have been shown to be effective in clinical trials, as early discharge without enhanced specialist services is probably associated with increased morbidity and mortality [14]. For all these reasons, reviews of service trials must be as complete as possible and report their search strategy.

HELEN RODGERS, PETER LANGHORNE
Centre for Health Services Research, 21 Claremont Place, Newcastle upon Tyne NE2 4AA, UK
Email: helen.rogers@ncl.ac.uk

1 Academic Section of Geriatric Medicine, Royal Infirmary, Glasgow, UK
Fax: (+44) 191 222 6043