Surgical Care for Rectus Diastasis in U.S. Ambulatory Surgery Centers, 2019-2020

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INTRODUCTION

- Rectus diastasis (RD) is the separation of the rectus abdominis muscles due to linea alba attenuation
- Surgical repair can be used to correct severe cases (**Figure A**)
- However, surgical treatment lacks standardization making insurance coverage inconsistent

PROBLEM STATEMENT

- We conducted this study to identify trends in the surgical treatment of RD and to identify factors associated with insurance coverage

METHODS

- Nationwide Ambulatory Surgery Sample, 2019-2020
- Discharges for adult patients with RD who underwent an abdominal wall surgical procedure
- Patients were sub-grouped according to the German Hernia Society guidelines
- Primary outcomes were surgical procedures performed and primary payer coverage
- Logistic regression model was constructed to identify factors associated with insurance coverage

RESULTS

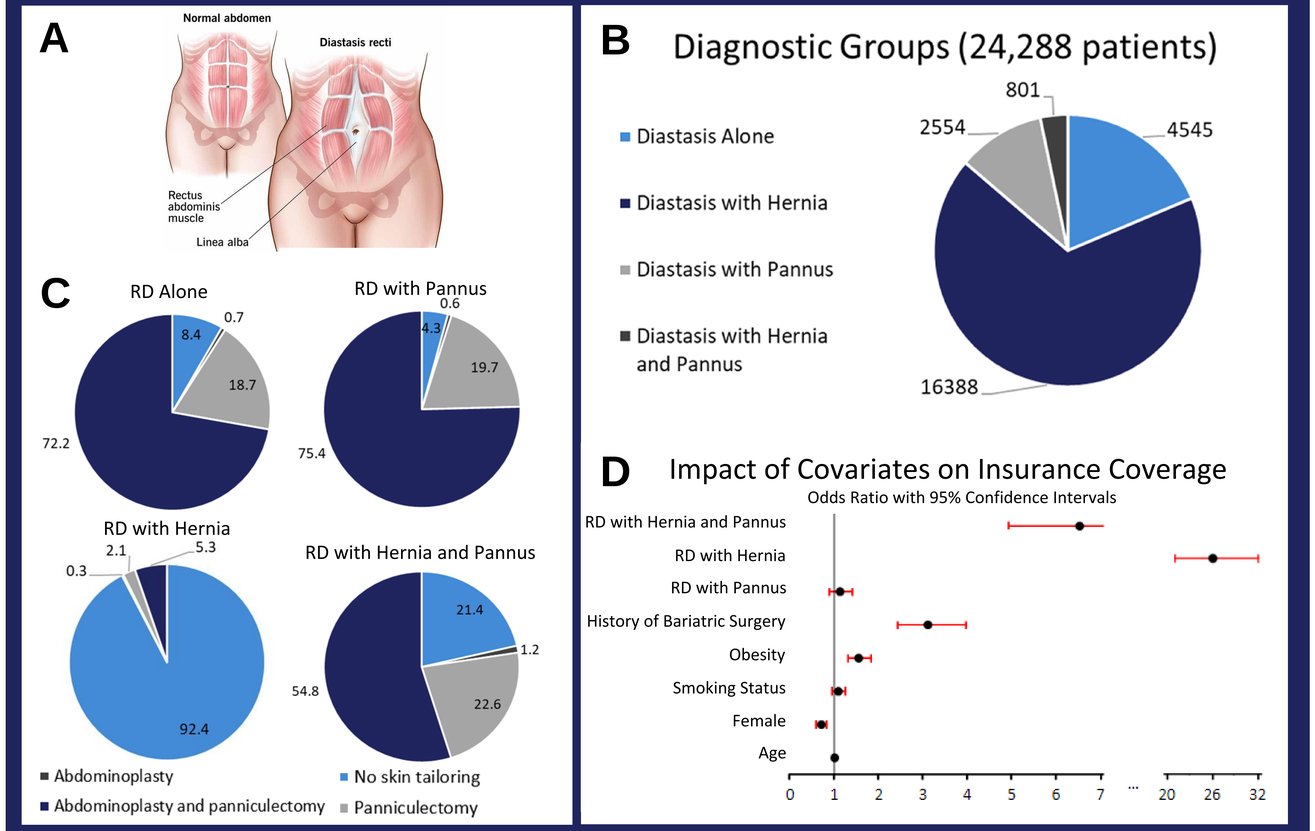


Figure A: Anatomical representation of RD compared to healthy patient
Figure B: Breakdown of patient classification based upon diagnosis
Figure C: Surgical procedure and hernia repair for each group
Figure D: Factors associated with insurance coverage

RESULTS (CONT)

- Final sample: 18,292 discharges
- Distribution by diagnostic group (see **Figure B**)
- Surgical treatment followed by diagnostic classification with the following key findings (see **Figure C**):
  - Not all patients underwent skin tailoring
  - Concurrent hernia repair had laparoscopic and open approaches
  - Component separation and mesh support employed in absence of hernia
- Insurance coverage varied by diagnostic group (see **Figure D**)

CONCLUSIONS

- Surgical treatment varies by diagnostic classification
- Key clinical factors are associated with insurance coverage for surgical repair

REFERENCES

- Full list of references in the QR code

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