

**COST OF TREATMENT FOR DIARRHOEAL PATIENTS AT DISTRICT  
HOSPITAL AND THANA HEALTH COMPLEX : A CASE STUDY OF  
MANIKGONJ DISTRICT IN BANGLADESH**

**Mr. QUAZI LIAQUAT ALI**



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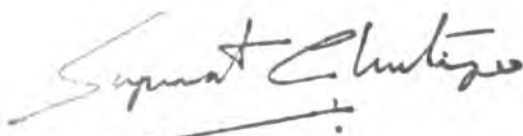
By : Quazi Liaquat Ali

Program : Health Economics

Thesis Advisor : Paitoon Kaipornsak , Ph.D.

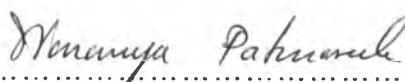
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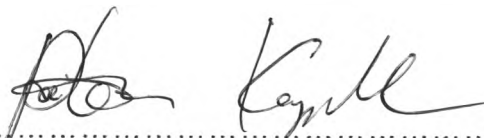


.....Dean of Graduate School  
( Prof. Supawat Chutivongse, M.D. )

Thesis Committee:



.....Chairman  
( Assoc. Prof. Waranya Patarasuk )



.....Thesis Advisor  
( Paitoon Kaipornsak, Ph. D. )



.....Member  
( Assoc. Prof. Manisri Puntularp )



.....Member  
( Asst. Prof. Isra Sarntisart, Ph. D. )

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QUAZI LIAQUAT ALI : COST OF TREATMENT FOR DIARRHOEAL PATIENTS AT DISTRICT HOSPITAL AND THANA HEALTH COMPLEX: A CASE STUDY OF MANIKGONJ DISTRICT IN BANGLADESH.

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The objective of the study is to calculate the unit cost of the provider in IPD and OPD of District Hospital and Thana Health Complex for the management of diarrhoea. This information is vital in understanding for planning the patient service for improving the effectiveness of the program as well as to charge the patient.

Provider costs in District Hospital and Thana Health Complex at Manikgonj District in Bangladesh were calculated through a retrospective survey and observations in 1997. Different cost components were identified from providers' perspective e.g., capital and recurrent cost items.

The estimated provider cost per patient day for the management of IPD cases at District Hospital was Tk 317.87, at Thana Health Complex it was Tk 406.90. Cost per OPD visit at District Hospital was Tk 53.74 and at Thana Health Complex it was Tk 63.32.

This study found that the provider cost for the treatment of diarrhoeal patients at District Hospital and at Thana Health Complex- the maximum cost component was the capital cost, followed in order by the labor and material costs. In District Hospital percentage of costs shared by capital, labor and material was 41.4%, 25.7% and 23.3% where as in Thana Health Complex it was 44.1%, 29.8% and 19.0% respectively of the total unit cost.

Average provider cost at IPD and OPD of District Hospital was much less than those of Thana Health Complex. This is mainly because of nearly full utilization of District Hospital and under utilization of Thana Health Complex and also may be District Hospital is more efficient and effective in their services.

Improving health facilities with the quality of services at rural level with higher efficiency worth considering to reduce excessive pressure at District Hospital and to increase the utilization of Thana Health Complex. Increased utilization will reduce the capital and also some recurrent costs at Thana Health Complex, as higher cost borne by the provider at rural level and patient at District level.

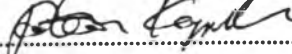
User charge may be introduced up to District level to recover at least recurrent costs of material according to financial solvency of the patients and should introduce referral system so that only more severe cases could be referred to District level and non-severe cases should be treated locally.

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## ABBREVIATIONS

Av	=	Average
ICDDR, B	=	International Center for Diarrhoeal Disease Research, Bangladesh
BBS	=	Bangladesh Bureau of Statistics
BHDS	=	Bangladesh Health and Demographic Survey
DGHS	=	Director General of Health Services
ETW	=	Electricity, Water and Telephone
FM	=	Fuel and Maintenance
GED	=	General Economic Division
GOB	=	Government of Bangladesh
IPD	=	In-patient Department
MO	=	Medical Officer
MOF	=	Ministry of Finance
MOHFW	=	Ministry of Health and Family Welfare
No	=	Number
OPD	=	Outpatient Department
Sq.ft	=	Square feet
SVR	=	Sample Vital Registration
THA	=	Thana Health Administrator
THC	=	Thana Health Complex
Tk	=	Taka (Unit of Bangladesh currency)
WHO	=	World Health Organization
Yr	=	Year
UNICEF	=	United Nations Children Fund