

In Reference to “The Weekend Effect in Hospitalized Patients: A Meta-Analysis”

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The prevalent reason offered for increased mortality rates during weekend hours are shortages in staffing and services. The “weekend effect,” elucidated by Pauls et al.¹ in their recent meta-analysis, and the accompanying editorial by Quinn and Bell,² highlight these and other potential causes for this anomaly.

Pauls et al.¹ also cite patient selection bias as a possible explanation for the uptick in deaths during this span (off-hour admissions may be sicker). It is due to the latter that we wish to highlight additional studies published after mid-2013 when the authors concluded their search.

Recent disputes within the UK’s National Health Service³ concerning health system funding spurred timely papers in *BMJ*⁴ and *Lancet*⁵ on the uncertainty. They both discovered a stronger signal from patient characteristics admitted during this time rather than on-hand resources and workforce. These new investigations strengthen the support for patient acuity

as a determinant in explaining worse outcomes.

We highlight these manuscripts so investigators will continue their attempts to understand the weekend phenomena as suggested by both Pauls et al.¹ and the editorialists.² To allow for the delivery of correct interventions, we must understand its root causes. In this case, it may be the unique features of patients presenting on Saturdays and Sundays and, hence, would require a different set of process changes.

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