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Greatest risk to patients now in the days after surgery, medical conference hears

Complications after surgery are now the greatest risk to patients, not the actual operation, and could best be described as Australia and New Zealand's hidden pandemic, a key medical conference will be told today (Sunday 7 May) in Sydney.

Specialist anaesthetist Professor David Story, Vice-President of the Australian and New Zealand College of Anaesthetists (ANZCA), says hospital specialists and GPs are seeing more and more patients who are older and sicker and this has worsened since the onset of COVID-19 in early 2020.

Speaking at the ANZCA Annual Scientific Meeting (ASM) being held at the International Convention Centre, Professor Story says it is the days after surgery, not the actual operation, that now present the greatest risk to patients. These patients are vulnerable because of other underlying medical conditions and can be the elderly or the very young.

"What's become apparent is that dying within 30 days of surgery is, in fact, one of the leading causes of death in Australia and New Zealand, and this is largely unrecognised," he says.

"We now know that while still extremely rare the risk of dying within 30 days of surgery is higher than during actual surgery and you are 1000 times more likely to die after an operation than during it. Patients with a range of medical conditions are at higher risk of poor outcomes.

"Better, co-ordinated care of surgical patients before, during and after their surgery – what we call the perioperative period – leads to improved outcomes for patients and cost savings for the health system.

"Australia and New Zealand have some of the best post-surgical survival rates in the world. However, we do have a hidden pandemic of complications and deaths after surgery."

It is estimated that the cost of one post operative complication is about \$10,000 and this increases the longer a patient stays in hospital.

Professor Story, a specialist anaesthetist at the Austin Hospital in Melbourne and head of the Department of Critical Care at the University of Melbourne was speaking at the launch of the ANZCA Diploma of Perioperative Medicine. The new qualification, which will soon enrol its first participants, will enable specialist doctors such as anaesthetists,

surgeons, physicians, intensivists, and GPs to enhance their skills and knowledge in perioperative medicine.

Hospitals in Australia and New Zealand will also be established as trial sites for the new perioperative medicine model.

“This new, emerging model of patient care will help us and other specialists to identify and provide training that will enhance the outcomes for the older and sicker patients we are now seeing compared to a generation ago. This group of patients, mostly aged in their 70s and 80s, are now having more operations than the same age group a generation ago and this means they have more complications in the days after their surgery.”

Professor Story says large clinical trials led by anaesthetists continue to show that, “despite best possible care, there's still a high rate of complications amongst our higher risk patients.”

“So, despite having some of the best outcomes in the world, we can do better,” he explains.

“It is concerning that there are now a lot of patients who get re admitted to hospital after they have been discharged. We're continuing to see high rates of complications after surgery such as kidney and heart damage and sepsis.”

ANZCA President Dr Chris Cokis says perioperative care has an important role to play in the health systems of Australia and New Zealand and anaesthetists are playing a lead role in its development.

“By leading high quality care in anaesthesia, perioperative and pain medicine, we are optimising health and reducing the burden of pain for all in the community,” he explains.

“Perioperative medicine emphasises the importance of an integrated, planned and personalised approach to patient care before, during and after any surgical procedure involving anaesthesia. Adopting a perioperative care approach can reduce postoperative complications, reduce inpatient hospital days and reduce early re-admissions following surgery.”

“The greatest benefits will be to vulnerable patients such as the very old, the very young and those with underlying health conditions who will be more satisfied and endure less pain as part of their surgical treatment. We now have many patients who already have major complications or problems prior to surgery. So that means we must optimise and personalise their care before, during and after surgery.”

Key facts:

- There are more than three million procedures a year in Australia and New Zealand.
- 10,000 people die within 30 days of surgery.
- 100,000 patients have major complications.
- 250,000 patients have minor complications.

The average cost of complications per patient: \$8,000-\$10,000

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