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Looking forward to a safer future: The new WHO guidelines for safe surgery

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Abstract Only

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Each year in Australia there are approximately 2 million hospital admissions for surgical services (Australia's Health, 2008) and this number is set to grow significantly, with forecasts of at least a 22% increase by 2021 (Birrell, Hawthorne & Rapson, 2003). Surprisingly, for such a high-risk high-volume specialty, we have very little data on perioperative adverse events. This lack of even basic data means that we are unable to track event rates, leaving us oblivious to the full extent of the problem.

Research on intraoperative adverse events tells us that the rate of major complications is between 3-16%, with a mortality rate of 0.4-0.8%. (Kable, Gibbered & Spigelman, 2002; Gawande et al, 1999). Applying the lowest of these rates (3% & 0.4%) to Australia's surgical population reveals that a staggering 60,000 patients annually suffer significant complications, with 8000 patients dieing during or immediately after surgery as a result of adverse events. This is indeed a significant number, and given that the research indicates that nearly half of these events are preventable (Kable, Gibbered & Spigelman, 2002; Gawande et al, 1999), one that clearly needs addressing.

This paper will review the research on perioperative safety and adverse events and examine some of the safety strategies put forward in the new World Health Organizations (WHO) Guidelines for Safe Surgery. These guidelines were developed for the WHO by renowned perioperative safety champion Dr Atul Gawande and contain recommendations for 'safer surgery practices' that have been demonstrated to reduce adverse events.