

Day surgery anaesthesia update

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Day surgery has emerged as a crucial component in the modern healthcare landscape, especially in the post-pandemic era of constrained healthcare resources. The shift towards outpatient surgical procedures offers numerous benefits, including reduced hospital stay, cost savings, and optimized patient recovery. This lecture delves into the comprehensive anaesthetic considerations essential for the success of day surgery programs, highlighting recent trends, best practices, and critical challenges.

Current Context and Utilization Trends

The COVID-19 pandemic significantly impacted elective surgery waiting lists, leading to a backlog of cases and increased demand for day surgery. In Australia, day surgery is a significant contributor to surgical productivity, with standalone day hospitals accounting for 22% of all private hospital separations. However, the adoption of day surgery varies significantly within the public system, and there are international jurisdictions that have had more success in aggressively expanding their day surgery programs, which we will examine in this lecture.

Perioperative Medicine Framework

A multidisciplinary, team-based approach is pivotal in optimizing the uptake of day surgery. The Australian and New Zealand College of Anaesthetists (ANZCA) has introduced a new qualification in Perioperative Medicine, which it defines as managing surgical patients from the time that surgery is contemplated, through to the realization of an optimal outcome. The evolution of this emerging subspecialty comes at an opportune time for the acceleration of day surgery programs, as successful day surgery depends on rigorous assessment of patient suitability, streamlined perioperative care pathways, and evidence-based management of comorbidities. Day surgery can only be truly successful when practiced in a framework of outstanding multidisciplinary perioperative care.

Preoperative Considerations

Preoperative preparation is crucial for the success of day surgery. Key aspects include:

- Patient Education: Ensuring patients are well-informed about their day surgery status at the time of booking.
- Assessment and Optimization: Dedicated pre-operative assessments by the anaesthesia team to identify and manage comorbidities early.
- ERAS Pathway Development: Establishing procedure-specific guidelines and separating day surgery pathways from inpatient and emergency surgery to prevent delays and cancellations.

Patient Selection and Optimization

Traditional exclusion criteria based on BMI, ASA, and age are being re-evaluated to expand the eligible population for day surgery. Instead of rigid exclusion criteria, a case-by-case assessment approach is recommended, considering social factors and the patient's ability to manage post-operative care at home. The preadmission assessment clinic plays a crucial role in optimizing patients with chronic conditions and ensuring they are fit for day surgery.

Intraoperative Considerations

Efficiency in scheduling and minimization of tissue trauma and anaesthesia duration are key to successful day surgeries. Important intraoperative considerations include:

- Short-acting Anaesthetic Agents: Preference for agents that allow quick recovery and minimal side effects.
- Multimodal Analgesia: Utilizing a combination of analgesics to manage pain effectively without relying heavily on opioids.
- Minimizing Fasting: Allowing free access to clear fluid pre-operatively has been shown to reduce patient discomfort without increasing adverse outcomes.

Postoperative Management

Effective postoperative management ensures timely discharge and patient satisfaction. Critical elements include:

- Criteria-led Discharge: Empowering nursing teams to discharge patients based on predefined criteria.
- Postoperative Analgesia: Ensuring prescriptions are ready for discharge and pain management protocols are in place.
- Ambulatory Care Pathways: Providing patients with adequate information and a dedicated pathway to seek postoperative advice and care.

Challenges and Future Directions

The expansion of day surgery faces several challenges, including patient selection complexities, managing comorbidities, and ensuring adequate follow-up care. Future directions involve the use of telehealth for perioperative assessments, novel remote monitoring devices, and continuous benchmarking and quality assurance to improve outcomes and patient satisfaction.

In conclusion, the evolution of day surgery requires a collaborative, evidence-based approach to anaesthesia and perioperative care. By addressing the current challenges and adopting standardized practices, perioperative teams can enhance the efficiency and safety of day surgery, ultimately benefiting patients and the broader healthcare system.

References

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