Systematic review of studies investigating shared decision making prior to potential emergency surgery for frail/older patients

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Introduction

- Shared decision making (SDM) is the recommended way to make healthcare decisions. It is supported by the Royal College of Surgeons, General Medical Council and protected through legislation
- Evidence continues to be produced to support the use and implementation of SDM prior to elective surgery, however, little work appears to have been done in the emergency surgical setting

OSIRIS NICE National Institute for Health and Care Excellence ALPACA STUDY

- Worse outcomes in frail patients after emergency surgery increase the importance of pre-operative decision making

Aims & Objectives

Aim:

- to summarise the evidence investigating SDM in the emergency surgical setting

Objectives:

- to outline the areas of emergency surgery in which SDM had been investigated
- to identify interventions used in the emergency surgical setting

Methods

- PROSPERO registered systematic review using PRIMSA guidelines
- Dual screening of asbtracts, full papers and independent checking of data extraction
- Search was completed in November 2024
- Risk of bias assessed using MMAT
- Narrative synthesis was completed
- Papers investigating frailty included in this analysis

PRISMA

PROSPERO NIHR National Institute for Health and Care Research

Results

4513 abstracts and 61 full texts were screened with 18 papers included. 5 papers specifically investigated patients with frailty

Speciality	N
Emergency General Surgery	2
Emergency Surgery	1
Orthopaedics	2

Perspectives	N
Patient	3
HCP	1
Both	1

No papers were interventional studies, with interventions studied including surgeon training and decision aids.

Conclusions

SDM in the context of emergency surgery for older patients or patients with increasing frailty remains under-researched. Further work to identify decision making priorities and improve SDM in this context is required.

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