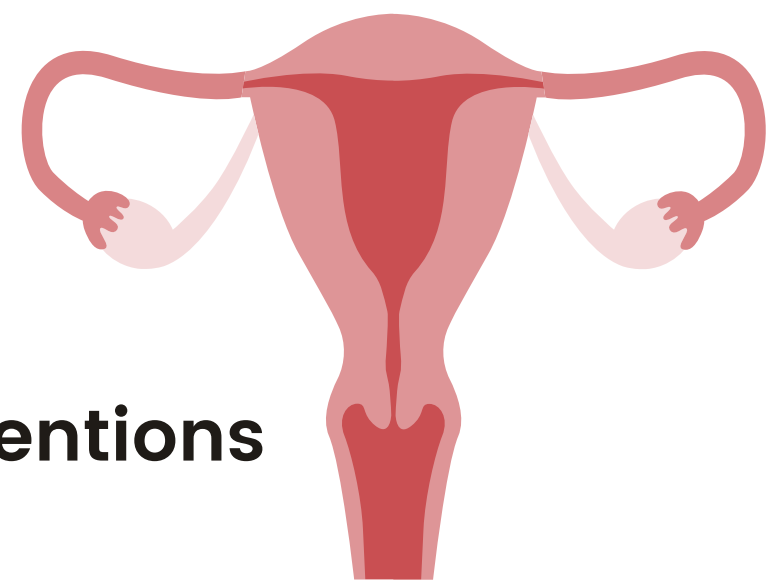


THE USE OF AGE IN PREDICTING THE LIKELIHOOD OF INTRA-OPERATIVE AND POST-OPERATIVE COMPLICATIONS IN TOTAL LAPAROSCOPIC HYSTERECTOMIES.



INTRODUCTION

Total Laparoscopic Hysterectomies (TLHs) are one of the most common gynaecological surgical interventions in the ageing population. It is a keyhole operation to remove the uterus and cervix, indications include menorrhagia, malignancy and uterine fibroids. Whilst co-morbidities have huge influence on the perceived patient suitability for surgery, patient factors like age ought to also be considered in the pre-operative stage so that clinicians are able to counsel patients on their individualised risks so that an informed decision can be made.

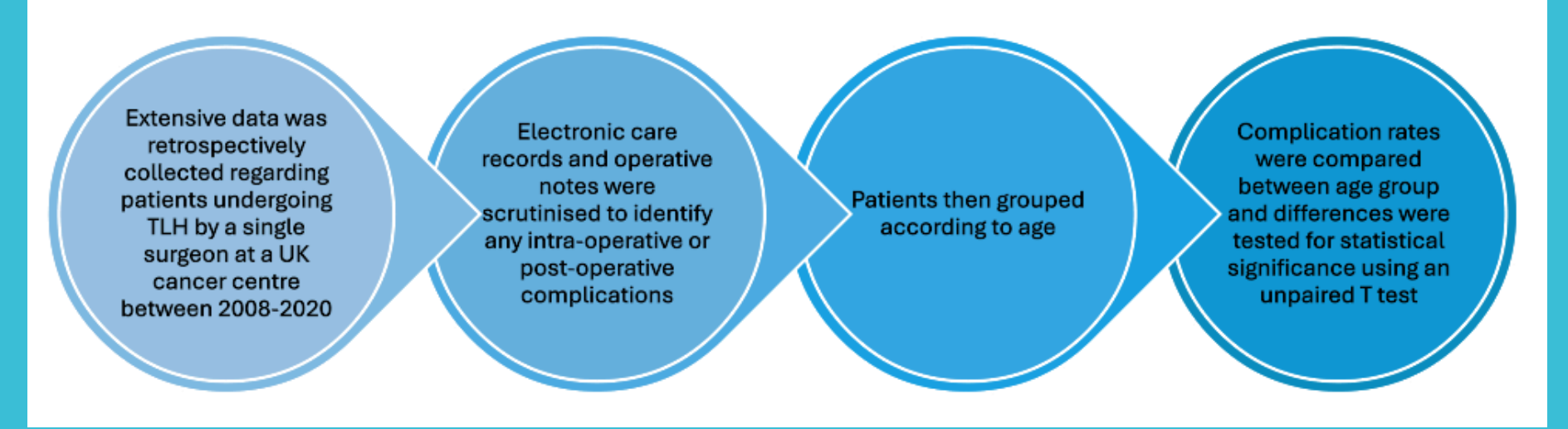


OBJECTIVE

Identify the **impact of age** on the **likelihood of operative complications** in TLHs, **guiding specific counselling** for older patients considering this procedure.



METHODOLOGY



Extensive data was collected retrospectively using electronic care records and operative notes regarding patients undergoing TLH by a single surgeon at a UK cancer centre between 2008-2020 (N=593).

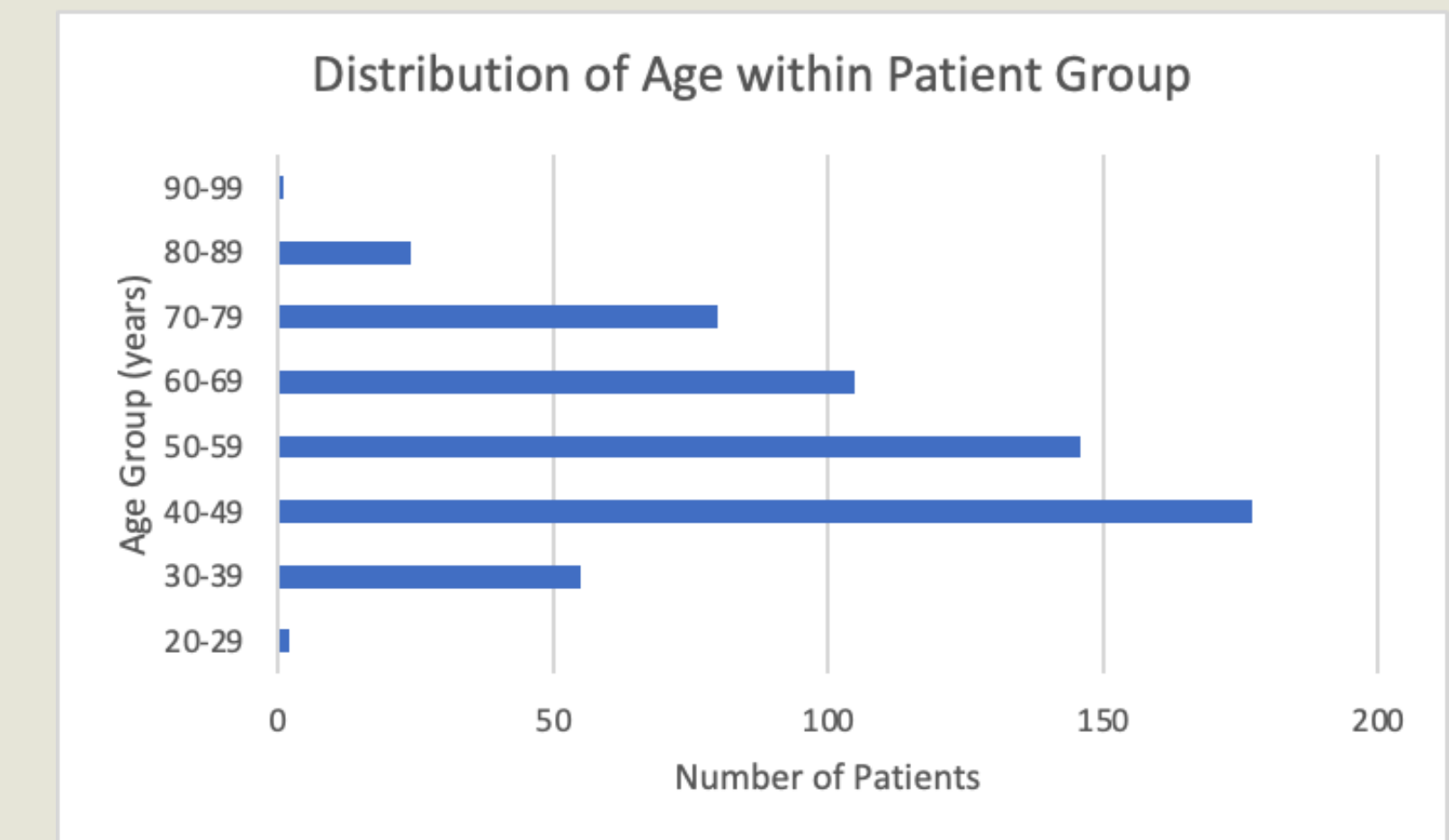
- Identified intra-operative complications:
- Bladder injury
 - Bowel injury
 - Bleeding >500ml

- Identified post-operative complications:
- Bleeding
 - Infection
 - Re-admission
 - Return to theatre
 - Gynae Assessment Unit attendance

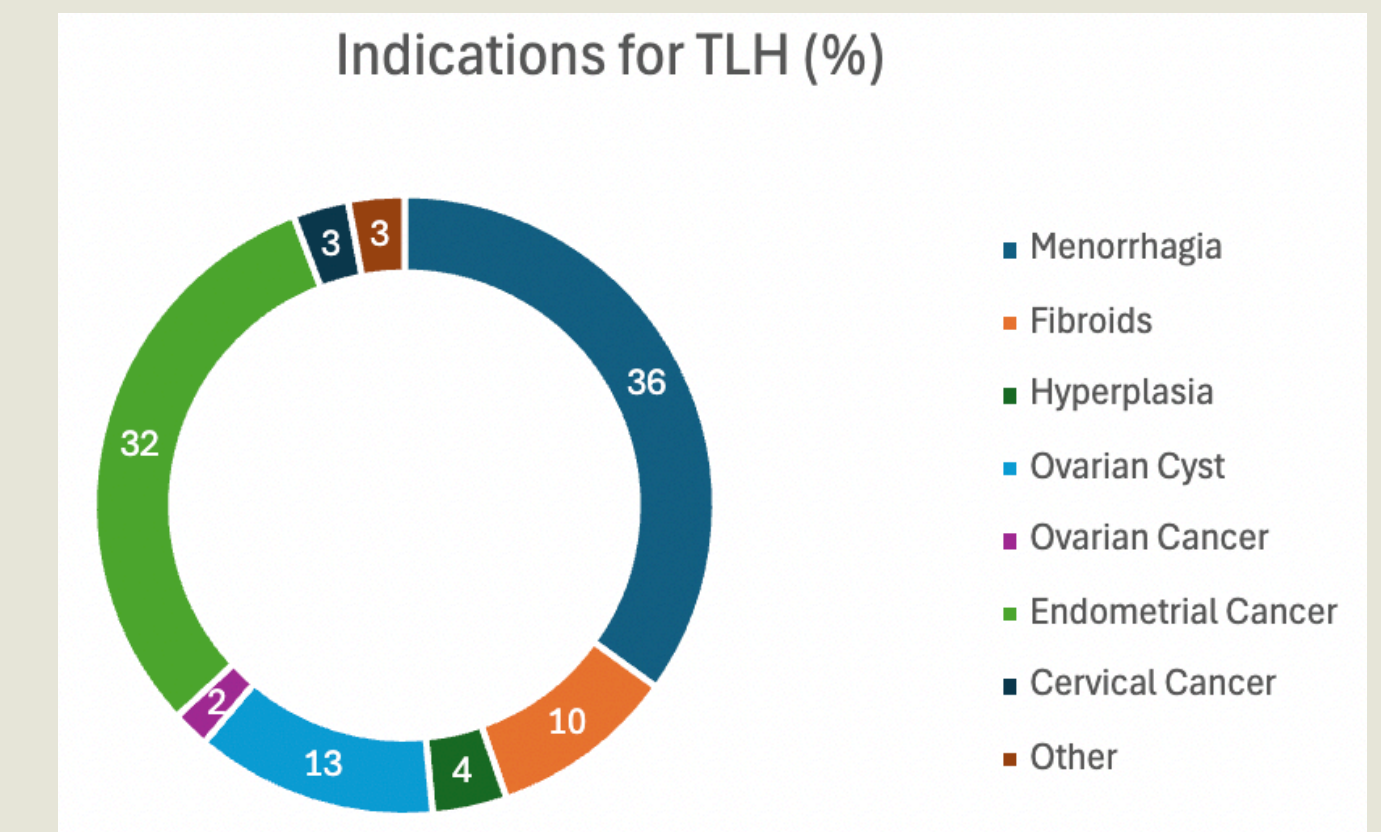
Patients were grouped according to their age and complication rates (intra-operatively and post-operatively) were compared between groups and differences tested for statistical significance ($p < 0.05$) using the unpaired T test.

THE PATIENT COHORT

593 Patients met the criteria to be included in study
35.4% of cohort were >60 (N=290)



Indications for TLH



Authors

L Ives; L Weenink; V Cullimore; S Bazmi; S Adley, S Abdul

Affiliations

DELTA Centre, Royal Derby Hospital, Derby



RESULTS

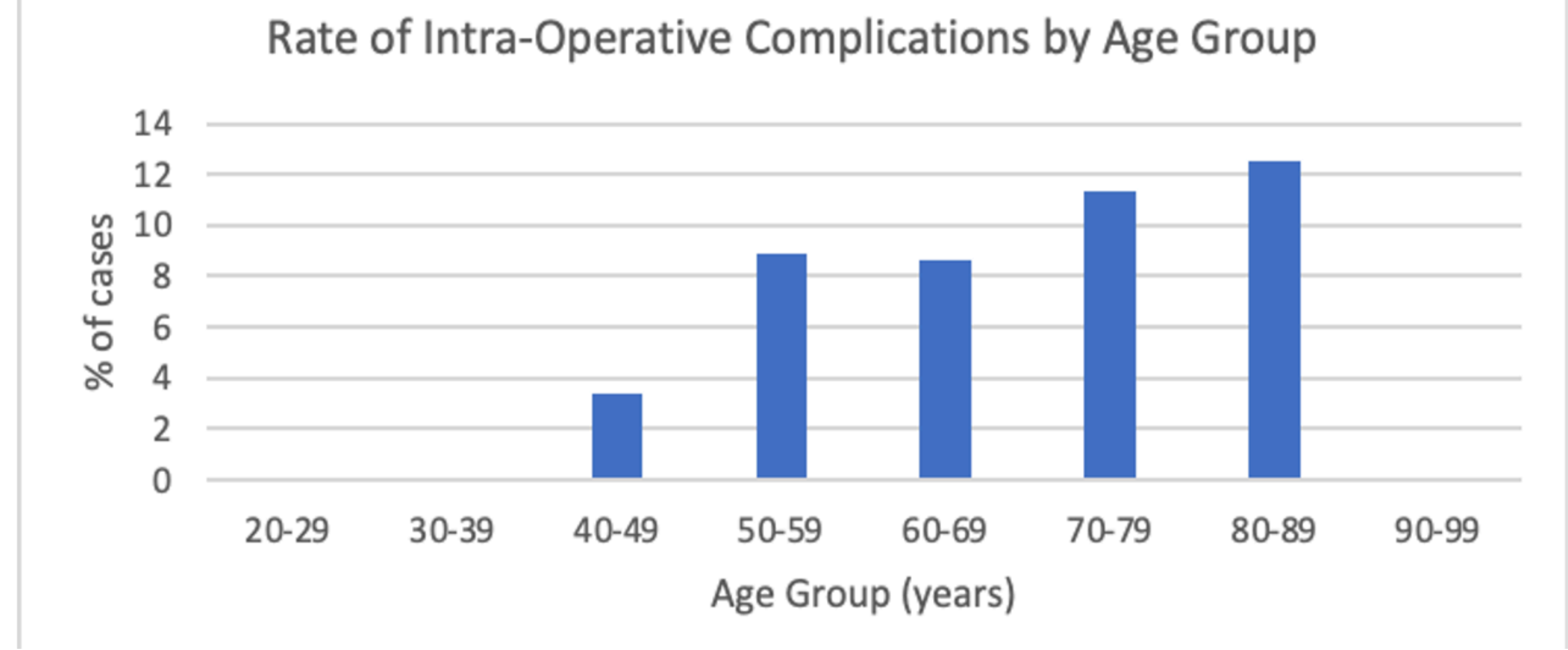
Overall peri-operative risks

Rates of peri-operative complications were 26.3% (n=128) in <70 years and 27.6% in >70 years (n=29)

Intra-operative Complications

Intra-operatively complication rates increased with age - 12.8% in 80-89yrs compared to only 3% in 40-49 years.

The most frequent intra-operative complication was intra-operative bleeding (N=17)



Significant differences when comparing intra-operative complication rates were found between most age groups

Age Group	P value
<50yrs vs >50yrs	P=0.001
<60yrs vs >60yrs	P=0.021
<70yrs vs >70yrs	P=0.04

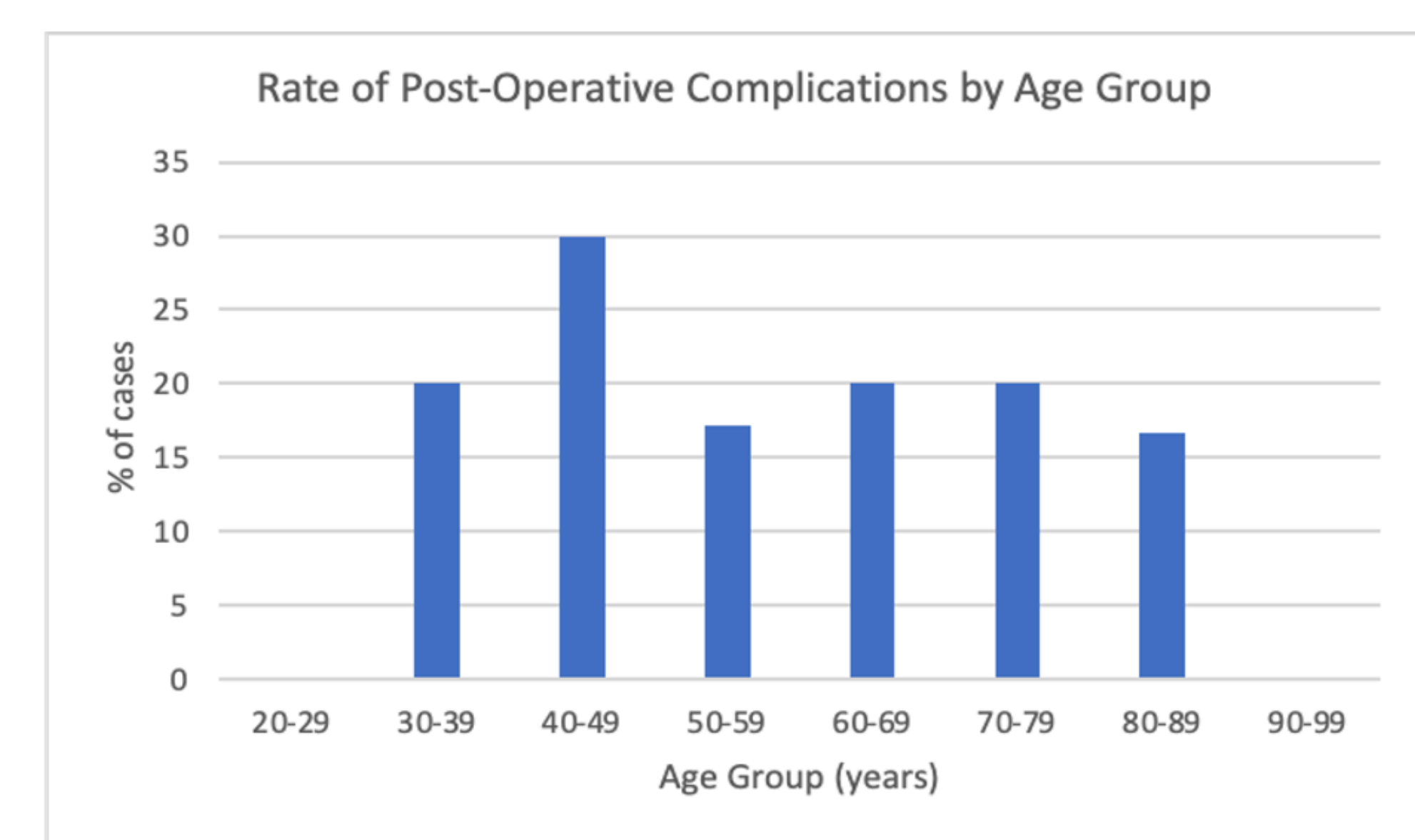
Post-operative Complications

Post operative complication rates were more variable with age.

The most common post-operative complication was infection (N=70)

When comparing between all age groups, no significant difference in post-operative complication rates was found. This is summarised in the table below:

Age Group	P Value
<50yrs vs >50yrs	P=0.27
<60yrs vs >60yrs	P=0.98
<70yrs vs >70yrs	P=0.69
<80yrs vs >80yrs	P = 0.76



CONCLUSION

With significant differences in TLH complication rates between different age groups, pre-operative assessment of patient factors becomes increasingly important. Not only for patient education purposes, but also for their suitability for surgery. Whilst co-morbidities are more pertinent in the ageing population which could account for this significant difference, age alone is a factor that should not be overlooked. It is a simple measure that is easily conceptualised to patients to stratify risk in the decision making process.