

# World Congress of Enhanced Recovery After Surgery and Perioperative Medicine Abstract Submission

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## WHAT ISSUES MUST WE ADDRESS IF WE ARE TO FURTHER ACCELERATE RECOVERY AND SHORTEN LENGTH OF STAY IN TOTAL HIP AND KNEE REPLACEMENT ERAS?

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### **Presentation Preference:** Oral or Poster

**Objectives:** UK ERAS pathways are well established but LOS is still longer than international exemplar sites. This survey asked staff what they felt were the issues that needed to be addressed in order to reduce LOS further.

**Methods:** Attendees at a multi-disciplinary meeting (Enhanced Recovery in Orthopaedic Surgery Conference, Glasgow, Scotland, 20/01/15) were surveyed.

**Results:** 58 respondents from 23 hospitals in England, Scotland, and Ireland, were made up of Nurses (27), Physiotherapists (18), Anaesthetists (7), Occupational Therapists (3), Surgeons (2), and a Pharmacist. 54 respondents had 2 or more years' experience working ERAS.

The staff felt that the most important factors for a short LOS within their own hospitals were; providing effective pre-operative patient education and expectation management (45), ensuring effective and adequate post-operative analgesia (41), and ensuring that patients were mobilised early (20). 18 respondents cited the importance of multidisciplinary team working, and 10 cited the importance of improved therapy access.

When the staff were asked which issues they felt they needed to improve within their own hospitals to further reduce LOS, 35 felt that better post-operative analgesia was required and 29 felt better pre-operative patient education and expectation management was required. There were 3 other major themes, managing the side effects of anaesthesia (22 felt that dizziness, nausea and vomiting needed to be addressed), facilitating early mobilisation (25 thought that more physiotherapy access and earlier mobilisation was needed), and ensuring a smooth discharge process (13 thought that better social and community support was required, and 12 highlighted the need for better planning).

**Conclusion:** Experienced ERAS staff cited pre-operative patient education and post-operative analgesia most frequently as key factors helping to reduce LOS, and also identified these two steps as the ones needing to be improved. Managing the side effects of anaesthesia, improved physiotherapy access, and greater social and community support post discharge were also deemed important.

**Disclosure of Interest:** None Declared