Surgeon’s death rates unlikely to detect poor performance

Figures published online that detail death rates from surgical procedures do not give a reliable indication of how well a surgeon is performing, research has found.

Experts say the data are not a useful indicator of good or bad practice and new measures of assessing surgeon’s performance are needed to safeguard patients.

Greater focus on tracking recovery from surgery – as well as patient satisfaction – may offer a more suitable metric to assess individual surgeon’s success, the team says.

Researchers from the University of Edinburgh looked at patient outcomes from six common surgical procedures between 2010 and 2014.

They found that individual surgeons do not perform enough procedures for the figures to identify those with an above average death rate.

Surgeons carrying out lower risk operations – such as hip replacements – would need to treat more than 500 patients a year for the figures to reveal those with poor success rates, the team says.

As mortality rates for all surgical procedures continue to fall, it will become less useful to use deaths as a measure of the quality of surgeons’ work, they argue.

The researchers say that records of patient outcomes and death rates are not consistent between hospitals and units, which makes the figures difficult to interpret reliably.

They recommend that reporting should be standardised to gather more meaningful data.

The study, published in the journal *BMJ Open*, was funded by the Medical Research Council.

Mr Ewen Harrison, of the University of Edinburgh’s Department of Clinical Surgery, said: “Publishing surgeon’s mortality rates is a step towards transparency in medical care, but it offers little help in identifying poor performance. We must use this data as part of a wider initiative to keep the quality of care in UK hospitals high.”
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