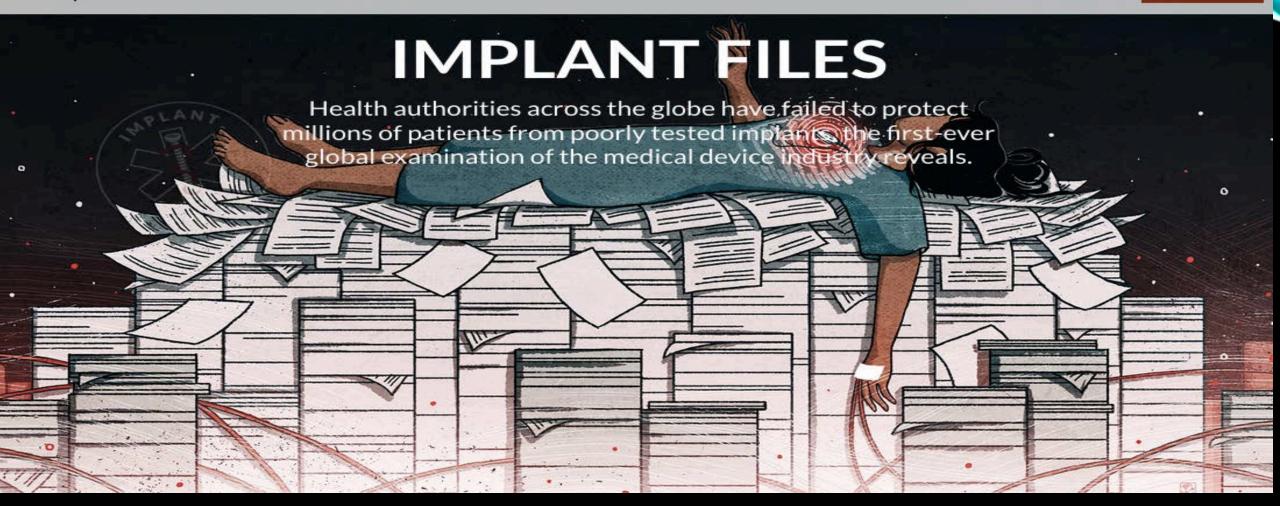
SAFETY CHALLENGES IN ARTHROPLASTY - SURGEON'S VIEWS



Li Felländer-Tsai, MD, PhD Second vice president EFORT

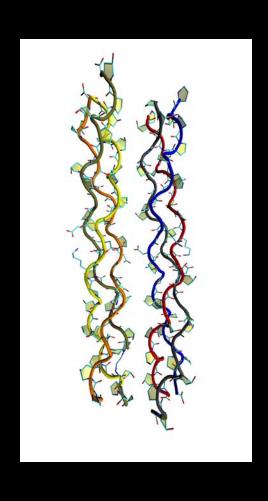
Professor and chair, senior consultant in orthopaedic surgery
Karolinska Institutet and Karolinska University Hospital
Stockholm, Sweden





https://www.icij.org/investigations/implant-files/

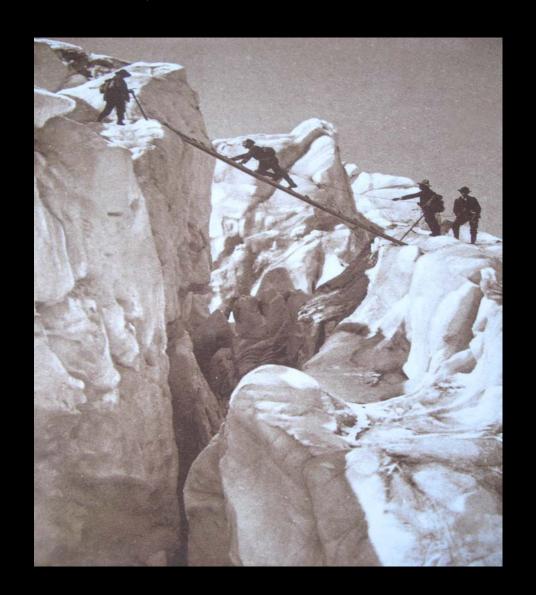
KEY FOR SUCCESS IS COLLABORATION

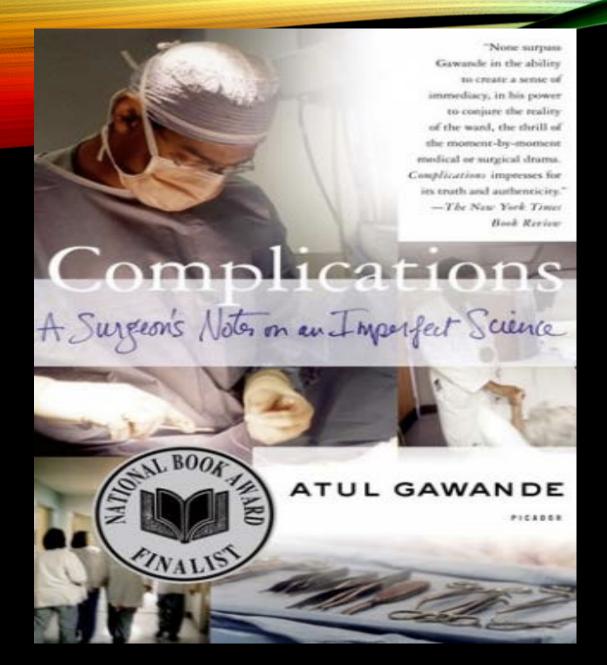


- Health care
- Industry
- Academy
- Patients

EQUIPOTENT RISK?







"Setter is a masterpleck, a sories of stacies set inside the four walls of a hospital that end up telling as samething unlargettable about the world notside."

-MALCOLM SLAUWELL, author of BLINK

Atul Gawande

ASTRON DI COMPLICATIONS



A SUPERIOR'S MOTES UN PERFORMANCE

PICABOR



TECH PUSH

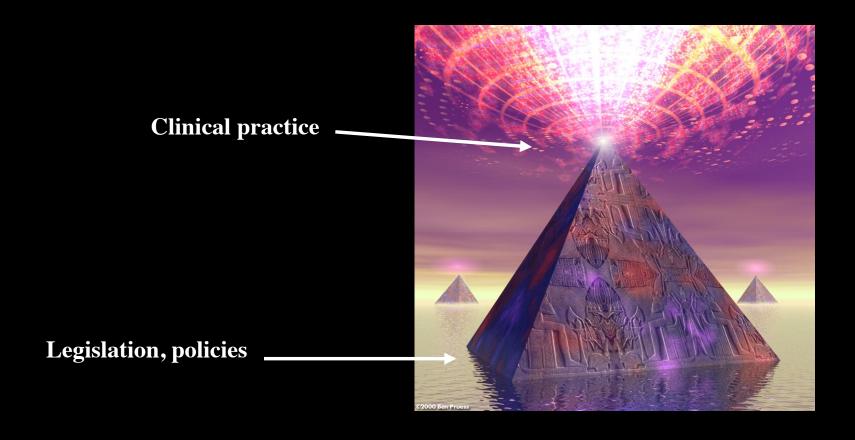




"FBG pressure"

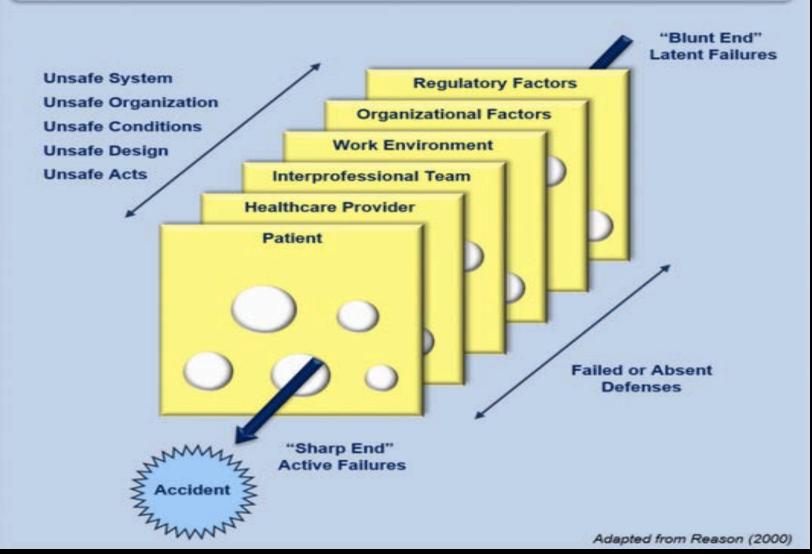
Faster Better Cheaper

THE SHARP AND BLUNT END OF SAFETY WORK IN HEALTH CARE



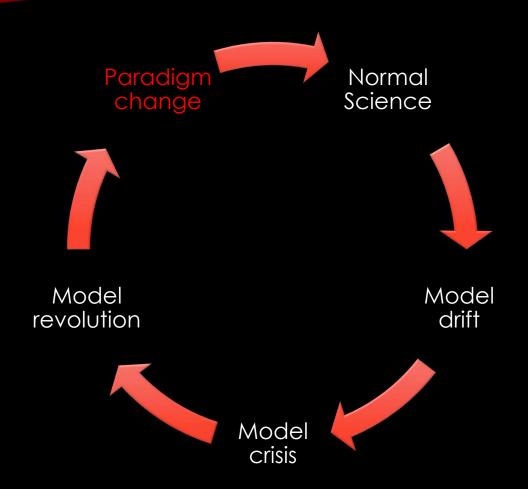


The Swiss Cheese Model



EXAMPLES OF SURGEONS VIEWS ON PATIENT SAFETY AT THE SHARP END

- Implant related factors
- Patient related factors
- Perioperative factors
- Surgeon related factors

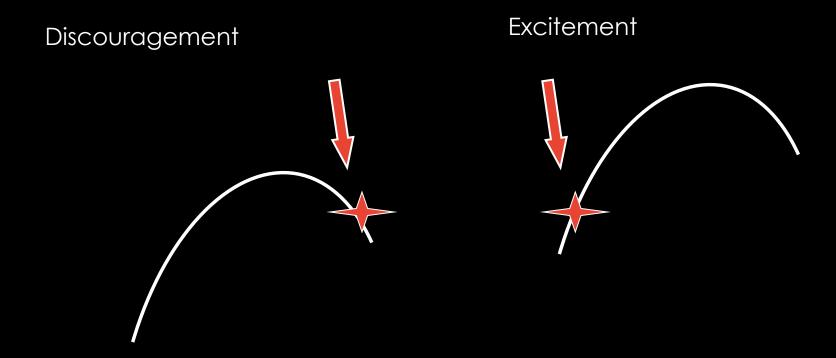


THOMAS S. KUHN THE STRUCTURE OF SCIENTIFIC REVOLUTIONS

A BRILLIANT, ORIGINAL ANALYSIS OF THE NATURE, CAUSES, AND CONSEQUENCES OF REVOLUTIONS IN BASIC SCIENTIFIC CONCEPTS

PERSONAL CONTRACTOR AND ADMIT

The structure of scientific revolutions



Science mostly works with a single paradigm driven by exemples of successful work. Proposals for paradigm change are resisted. *Kuhn T, Structure of scientific revolutions*

IMPLANT RELATED FACTORS

CT based analysis and follow up may enable a disruptive change in monitoring of implant motion and loosening

A new approach to stepwise introduction and quality control of new implants







PATIENT RELATED FACTORS

Perioperative smoking cessation Perioperative alcohol cessation

PERIOPERATIVE SMOKING CESSATION CAN REDUCE COMPLICATIONS

ANNALS OF SURGICAL SCIENCE SINCE 1885

RANDOMIZED CONTROLLED TRIALS

Effects of a Perioperative Smoking Cessation Intervention on Postoperative Complications: A Randomized Trial

Lindström, David MD, PhD*; Azodi, Omid Sadr MD[†]; Wladis, Andreas MD, PhD*; Tønnesen, Hanne MD, DrMSc[‡]; Linder, Stefan MD, PhD*; Nåsell, Hans MD[§]; Ponzer, Sari MD, PhD[§]; Adami, Johanna MD, PhD, MPH[†] Author Information ⊗

Annals of Surgery: November 2008 - Volume 248 - Issue 5 - p 739-745 doi: 10.1097/SLA.0b013e3181889d0d

PERIOPERATIVE ALCOHOL CESSATION CAN REDUCE COMPLICATIONS



Cochrane Database Syst Rev. 2018 Nov; 2018(11): CD008343.

Published online 2018 Nov 8.

doi: 10.1002/14651858.CD008343.pub3

PMCID: PMC6517044

PMID: 30408162

Perioperative alcohol cessation intervention for postoperative complications

Julie WM Egholm, Bolette Pedersen, Ann Merete Møller, Johanna Adami, Carsten B Juhl, and Hanne Tønnesen

Author information - Copyright and License information <u>Disclaimer</u>

PERIOPERATIVE FACTORS

Rapid recovery protocols

RAPID RECOVERY PROTOCOLS - SURGEON INVOLVEMENT IMPORTANT

Combatting:

- thromboembolic complications
- cardiopulmonary complications
- delirium
- early organ dysfunctions
 - pain,
 - nausea and vomiting,
 - fatigue, weakness, and dizziness

Potential pitfalls:

- Frail patients
- Unintended consequence on prosthetic fixation?

SURGEON RELATED FACTORS

Both technical and non-technical abilities are important Selection

THE ABILITY TO INTERPRET REGISTRY DATA AND SCIENTIFIC REPORTS



"Meaningless statistics were up one-point-five per cent this month over last month."



Clin Orthop Relat Res (2015) 473:1582–1589 DOI 10.1007/s11999-014-3966-2



SYMPOSIUM: PATIENT SAFETY: COLLABORATION, COMMUNICATION, AND PHYSICIAN

LEADERSHIP

How Prevalent Are Hazardous Attitudes Among Orthopaedic Surgeons?

Wendy E. Bruinsma MD, Stéphanie J. E. Becker MD, Thierry G. Guitton MD, PhD, John Kadzielski MD, David Ring MD, PhD

Published online: 2 October 2014

© The Association of Bone and Joint Surgeons® 2014

Acta Orthop. 2017 Oct;88(5):466-471. doi: 10.1080/17453674.2017.1298353. Epub 2017 Mar 15.

Risk preferences and attitudes to surgery in decision making.

Meunier A¹, Posadzy K², Tinghög G^{2,3}, Aspenberg P¹.

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- 2 b Department of Management and Engineering, Division of Economics, Linköping University.
- 3 c The National Center for Priority Setting in Health Care, Department of Medical and Health Sciences, Linköping University, Linköping, Sweden.

J SURG EDUC 2018

ORIGINAL REPORTS

Identification of Warning Signs During Selection of Surgical Trainees



Kristine Hagelsteen, MD, PhD, *,† Britt-Marie Johansson, PhD,‡ Anders Bergenfelz, MD, PhD, *,† and Chris Mathieu, PhD‡

^{*}Department of Clinical Sciences and Surgery, Lund University, Skåne University Hospital, Lund, Sweden; †Practicum Clinical Skills Centers, Skåne University Hospital, Lund, Sweden; and ‡Department of Sociology, Lund University, Lund, Sweden

SURGEONS WILL NEED TO TRAIN BOTH <u>TECHNICAL</u> AND <u>NON-</u> <u>TECHNICAL</u> SKILLS

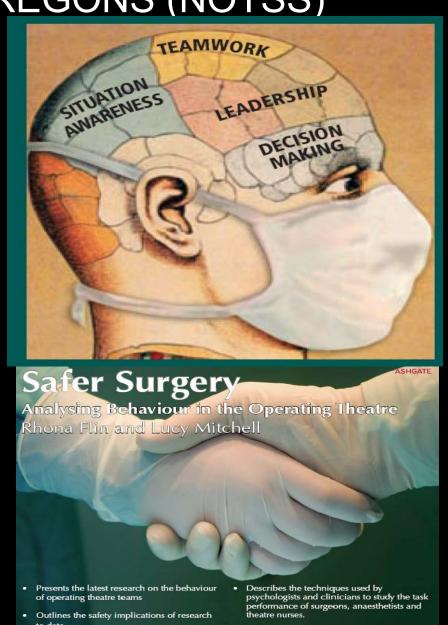


NON-TECHNICAL SKILLS FOR SUREGONS (NOTSS)

R FLIN ET AL UNIV ABERDEEN, R COLL SURG ED

Human factors in surgery

- Situation awareness
- Decision making
- Communication
- Teamwork
- Leadership



SURGEON SUMMARY 360° APPROACH TO PATIENT SAFETY

- The right operation
- With the right implant
- For the right patient
 - At the right time
 - In the right place
- With the right surgeon
 - With the right team
- With the right preparation
- With the right medication
- With the right rehabilitation

Experience is the name everyone gives to their mistakes

Oscar Wilde