

Danish Centre for Evaluation and Health Technology Assessment

## FAST-TRACK COLONIC SURGERY

A health technology assessment - summary

# Summary

## Technology

This health technology assessment concerns a fast-track surgical patient pathway aimed at improving the perioperative treatment of colon surgery patients. The pathway is based on a multifactorial and evidence-based strategy, the individual elements of which must always reflect optimal patient treatment. The individual elements together comprise the fast-track surgical patient pathway.

National and international clinical trials conclude that the fast-track patient pathway offers the following overall benefits: Reduced hospitalisation, faster normalisation of intestinal function and the possibility for faster mobilisation. Postoperative morbidity is unchanged or improved, in particular there being fewer medical complications (cardiac and pulmonary complications).

In addition, the fast-track patient pathway entails less postoperative fatigue and faster resumption of normal daily activities following discharge.

## Organisation

The organisational experience described in the present report has been gained at Hvidovre Hospital as part of a long-term development project. This experience is supported by parallel Danish and foreign development projects.

The introduction of the fast-track patient pathway requires that a number of *structural preconditions* be fulfilled. These include greater demands on interdisciplinary cooperation and the preparation and implementation of standard care plans and standards for patient treatment. Fast-track surgery also necessitates changes in work planning, and it is optimal to establish dedicated specialist teams for the task.

The indirect consequences of introducing the fast-track patient pathway are fewer beds in the department, more rooms for ambulant patients and a need for intensive education of health care personnel.

The introduction of the fast-track patient pathway also has some indirect *procedural effects*, both for the patient pathway and for the treatment of patients, including greater focus on preoperative patient information and coordination between the various health care actors.

The introduction of the fast-track patient pathway necessitates *changes in attitude* among the personnel and the necessary will to change old traditions. Further prerequisites are motivating educational programmes and the support of management.

## The patient

Very few published studies have investigated subjective patient satisfaction with the fast-track patient pathway. Among other things, the present health technology assessment investigated three subjective parameters of satisfaction: Satisfaction with discharge, satisfaction with information and satisfaction with palliative care. General patient satisfaction is improved or unchanged. Satisfaction with the information provided is improved or unchanged in the fast-track patient pathway, while satisfaction with palliative care is considerably greater. Fewer patients in the fact-track group felt that they were ready to be discharged

## Economic aspects

A cost-effectiveness analysis has been carried out. The cost calculations are based on calculations of the differences in the two patient pathways. The potential socioeconomic saving entailed by the fast-track patient pathway is DKK 3,800 per patient pathway. The cost-effectiveness analysis concludes that a dominant situation exists, i.e. that the fast-track patient pathway tends to be both cheaper and more effective in reducing postoperative morbidity. Overall, this means that it provides a socioeconomic benefit while concomitantly improving patient treatment.