Overlapping surgery appears safe in neurosurgical procedures

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(HealthDay)—For patients undergoing neurosurgical procedures,

overlapping surgery (OS) is not associated with morbidity, mortality, or worsened functional status, according to a study published online Nov. 8 in *JAMA Surgery*.

Brian M. Howard, M.D., from Emory University School of Medicine in Atlanta, and colleagues conducted a retrospective study in patients who underwent neurosurgical procedures for pathologies across the spectrum of neurosurgical disorders. Outcomes were compared for patients who received nonoverlapping surgery (927 surgeries; 42.7 percent) and OS (1,303 surgeries; 57.3 percent).

The researchers found that patients in the OS cohort had significantly longer median surgical times than those in the nonoverlapping surgery cohort (in-room time, 219 versus 188 minutes; skin-to-skin time, 141 versus 113 minutes). OS was more often elective than nonoverlapping surgery (93 versus 87 percent), and there was no correlation between OS and complications such as mortality, morbidity, or worsened functional status in regression analysis. There were correlations between measures of baseline severity of illness, such as admission to the intensive care unit and increased length of stay, and mortality (odds ratios, 25.5 and 1.03), morbidity (odds ratios, 1.85 and 1.06), and unfavorable functional status (length of stay: odds ratio, 1.03).

"These data suggest that OS can be safely performed if appropriate precautions and patient selection are followed," the authors write. "Data such as these will help determine health care policy to maximize patient safety."

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