

High-volume surgeons key to survival in open repair for AAA

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(HealthDay)—Centers that meet the Society for Vascular Surgery (SVS)

guidelines for elective open aortic abdominal aneurysm (AAA) repair are associated with improved patient survival, with surgeon volume confounding results, according to a study published in the February issue of the *Journal of Vascular Surgery*.

Joshua T. Geiger, from the University of Rochester Medical Center, and colleagues examined the effect of SVS guidelines on postoperative [mortality](#) and complications among patients who had undergone elective open AAA repair from 2003 to 2014. The cohort included 7,594 elective open AAA repairs performed by 542 surgeons at 137 hospitals.

The researchers found that for centers that were within the SVS guidelines, the one-year and 30-day mortality rates were 9.2 and 3.5 %, respectively, compared with 13.6 and 6.9%, respectively, for those outside the guidelines. The one-year mortality hazard ratios were 0.80 (95%confidence interval, 0.70 to 0.93; P = 0.003), 0.91 (95%confidence interval, 0.77 to 1.08; P = 0.298), and 0.72 (95%confidence interval, 0.62 to 0.82; P

"This supports centralizing elective open AAA operations to higher-volume surgeons at high-quality centers," a coauthor said in a statement. "This may have educational value for trainees as high-volume surgeons tend to practice at teaching hospitals."

More information: Joshua T. Geiger et al, Surgeon volume and established hospital perioperative mortality rate together predict for superior outcomes after open abdominal aortic aneurysm repair, *Journal of Vascular Surgery* (2021). [DOI: 10.1016/j.jvs.2021.08.077](https://doi.org/10.1016/j.jvs.2021.08.077)

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