

Postoperative mortality trends higher for Black and Hispanic children

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Racial and ethnic disparities persist in postoperative mortality among children, according to a study [published](#) online July 29 in *Pediatrics*.

Olubukola O. Nafiu, M.D., from Nationwide Children's Hospital in Columbus, Ohio, and colleagues conducted a population-based study involving 673,677 children from U.S. hospitals undergoing intermediate- to high-risk surgery between 2000 and 2019 to estimate the excess deaths that could be avoided if Black and Hispanic children had [mortality rates](#) comparable to those of [white children](#). The mortality reduction required to eliminate disparities within the next decade was estimated.

The researchers found that risk-adjusted postoperative mortality trended higher for Black and Hispanic versus white children during 2000 to 2019 (adjusted relative risks, 1.42 and 1.22, respectively). The gaps were driven by higher mortality among children receiving surgery in nonteaching hospitals (Black and Hispanic versus white: adjusted relative risks, 1.63 and 1.50, respectively).

Overall, 4,700 and 5,500 excess deaths were seen among Black and Hispanic children, respectively. Approximately 1,100 deaths would be prevented among Black children in the next decade with policy changes achieving an annual 2.5 percent reduction in postoperative mortality.

"Despite a steady decline in pediatric postsurgical mortality, persistent racial and [ethnic disparities](#) exist and are projected to continue unless robust, targeted actions are implemented to ensure equitable pediatric surgical outcomes," the authors write.

More information: Olubukola O. Nafiu et al, Race, Ethnicity, and Pediatric Postsurgical Mortality: Current Trends and Future Projections, *Pediatrics* (2024). [DOI: 10.1542/peds.2024-065906](https://doi.org/10.1542/peds.2024-065906)

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