Surgeon volume impacts parathyroidectomy outcomes
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Patients undergoing parathyroidectomy by high-volume surgeons have a lower rate of vocal cord paralysis compared to patients of low-volume surgeons, according to a study published online April 20 in JAMA Otolaryngology-Head & Neck Surgery.

Charles Meltzer, M.D., from The Permanente Medical Group in Santa Rosa, Calif., and colleagues examined the correlation between surgeon volume and 30-day rates of complications, mortality, and post-discharge utilization among 2,080 adult patients undergoing parathyroidectomy. Low- and high-volume surgeons who performed 20 or fewer versus more than 40 cases per year were compared. Patients receiving parathyroid procedures from low- and high-volume surgeons were matched using propensity scores with 547 matched pairs.

The researchers found that patients of high-volume surgeons had a lower rate of vocal cord paralysis compared to patients of low-volume surgeons (absolute difference, ?1.4 percent). To avoid one case of vocal cord paralysis, the number needed to treat was 71; the number could be as low as 34 based on the upper bound of the confidence interval. More outpatient procedures were performed by high-volume surgeons, with an absolute difference of 25.5 percent. Other differences did not reach statistical significance.

"Our findings led us to undertake a quality improvement initiative in which patients requiring parathyroid surgery are treated by higher-volume surgeons under care pathways we designed to standardize the treatment of patients with primary hyperparathyroidism," the authors write.

More information: Abstract/Full Text (subscription may be required)