

Pre-op physical therapy may cut pulmonary complications

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ratio, 0.48; $P = 0.001$) compared with the control group. The absolute risk reduction was 15 percent, with the number needed to treat of seven. There were no significant differences in length of hospital stay, utilization of intensive care unit services, and hospital costs.

"In a general population of patients listed for elective upper abdominal [surgery](#), a 30-minute preoperative [physical [therapy](#)] session provided within existing hospital multidisciplinary preadmission clinics halves the incidence of PPCs and specifically hospital-acquired pneumonia," the authors write. "Further research is required to investigate benefits to mortality and length of stay."

More information: [Abstract/Full Text](#)

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(HealthDay)—A 30-minute preoperative physical therapy session focused on breathing exercises is associated with a reduced incidence of postoperative pulmonary complications (PPCs) among patients undergoing upper abdominal surgery, according to a study published online Jan. 24 in *The BMJ*.

Ilanthe Boden, from Launceston General Hospital in Australia, and colleagues assessed the efficacy of a single 30-minute preoperative physical therapy session (with education and breathing exercise training) to reduce PPCs after upper abdominal surgery. The study included 441 adults aged 18 years or older who were within six weeks of elective major open upper abdominal surgery. They were randomized to receive an informational booklet or undergo the physical therapy session.

The researchers found that for the intervention group, the incidence of PPCs within 14 postoperative [hospital](#) days, including hospital-acquired pneumonia, was halved (adjusted hazard

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