

# Patient Experiences and Outcomes From a Novel Multidisciplinary Preoperative Shared Decision-Making Clinic

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**RESEARCH WEEK**  
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## Introduction

Increasing numbers of patients with advanced age, frailty or multiple co-morbidities are being considered for surgery. These patients often face difficult decisions, where surgery may offer benefits but is also associated with higher perioperative risk and a more challenging recovery<sup>1</sup>.

We set up a novel weekly multidisciplinary preoperative shared decision making clinic at our large metropolitan hospital in January 2023. Our Complex Decision Making (CDM) Clinic aims to support elderly, frail and/or very comorbid patients to make decisions about surgical treatment based on their values and goals.

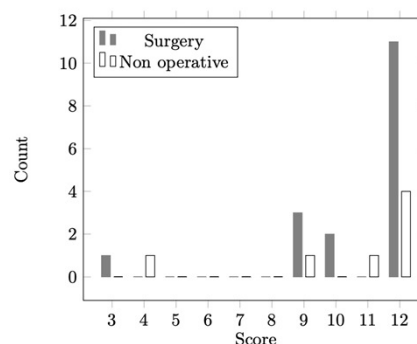
As this was a novel clinic, we aimed to study the characteristics, postoperative outcomes and quality of shared decision making for patients who participated in the CDM clinic in its first year of its operation.

## Methods

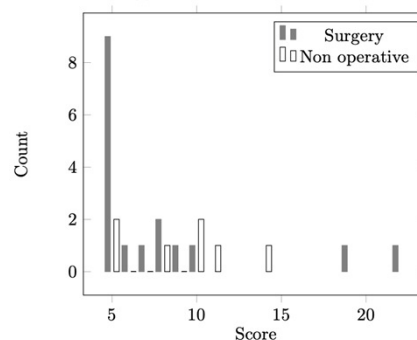
Following local ethics approval (Ref: 2024\_non-HREC\_32), data regarding patient demographics, preoperative status and postoperative outcomes, including lengths of stay, ICU admission and Days At Home within 30 days (DAH<sub>30</sub>) were collected via review of the medical records. Quality of SDM (CollaboRATE-5<sup>2</sup> and Decisional Regret Scale<sup>3</sup> (DRS)) were collected via medical record review and telephone interview. Data collection took place between July and November 2024.

## Results

71 patients attended the clinic, with a median age of 78 years (IQR 70.5-84), of whom 49 (69%) had a Clinical Frailty Scale score of  $\geq 4$ . Follow-up of patients took place between 10 and 19 months after initial CDM clinic visit. By then, 41 (58%) of patients had proceeded to surgery, with outcomes shown in table 1.



(a) CollaboRATE scores



(b) Decision Regret Scale

Figure 1. Quality of decision making

|                                                     |              |
|-----------------------------------------------------|--------------|
| Mean acute hospital LoS, days, median (IQR)         | 4 (2-6)      |
| ICU Admission, n(%)                                 | 19 (46%)     |
| ICU LoS, days, median (IQR)                         | 1 (1-2)      |
| Days alive and at home within 30 days, median (IQR) | 25.5 (20-27) |
| Mortality, n (%)                                    |              |
| - at 30 days                                        | 2 (4.9%)     |
| - at 12 months                                      | 5 (12.2%)    |

Table 1. Post operative outcomes

The 1-year mortality rate for patients who did not proceed to surgery was 26.7%. For those who completed follow-up, median CollaboRATE score was 12 (IQR 9.8-12) (figure 1a) and median Decision Regret Scale was 6.5 (IQR 5-10) (figure 1b).

## Discussion

In the first year of its operation, our novel preoperative shared decision-making clinic successfully identified a cohort of elderly, frail and comorbid patients being considered for surgery. Follow-up showed that patients who proceeded to surgery generally experienced favourable postoperative outcomes. Patients who participated in telephone follow-up reported high quality of shared decision making and low decisional regret.

## References

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