

"GET WITH THE GUIDELINES": FAVORABLE IMPACT OF A SECONDARY-CARE HOSPITAL EXPERIENCE OF PERIOPERATIVE MYOCARDIAL SPECT APPROPRIATENESS

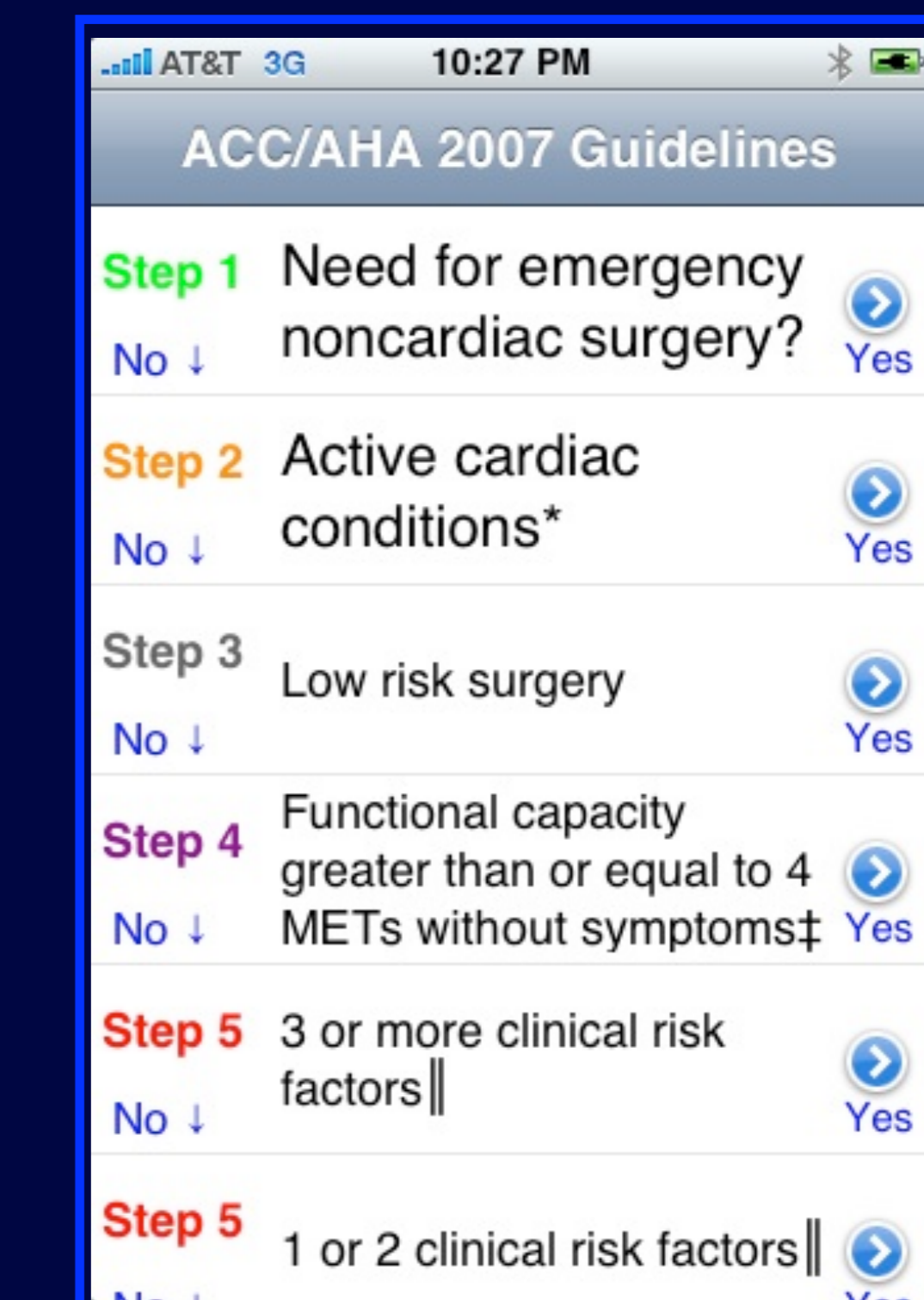
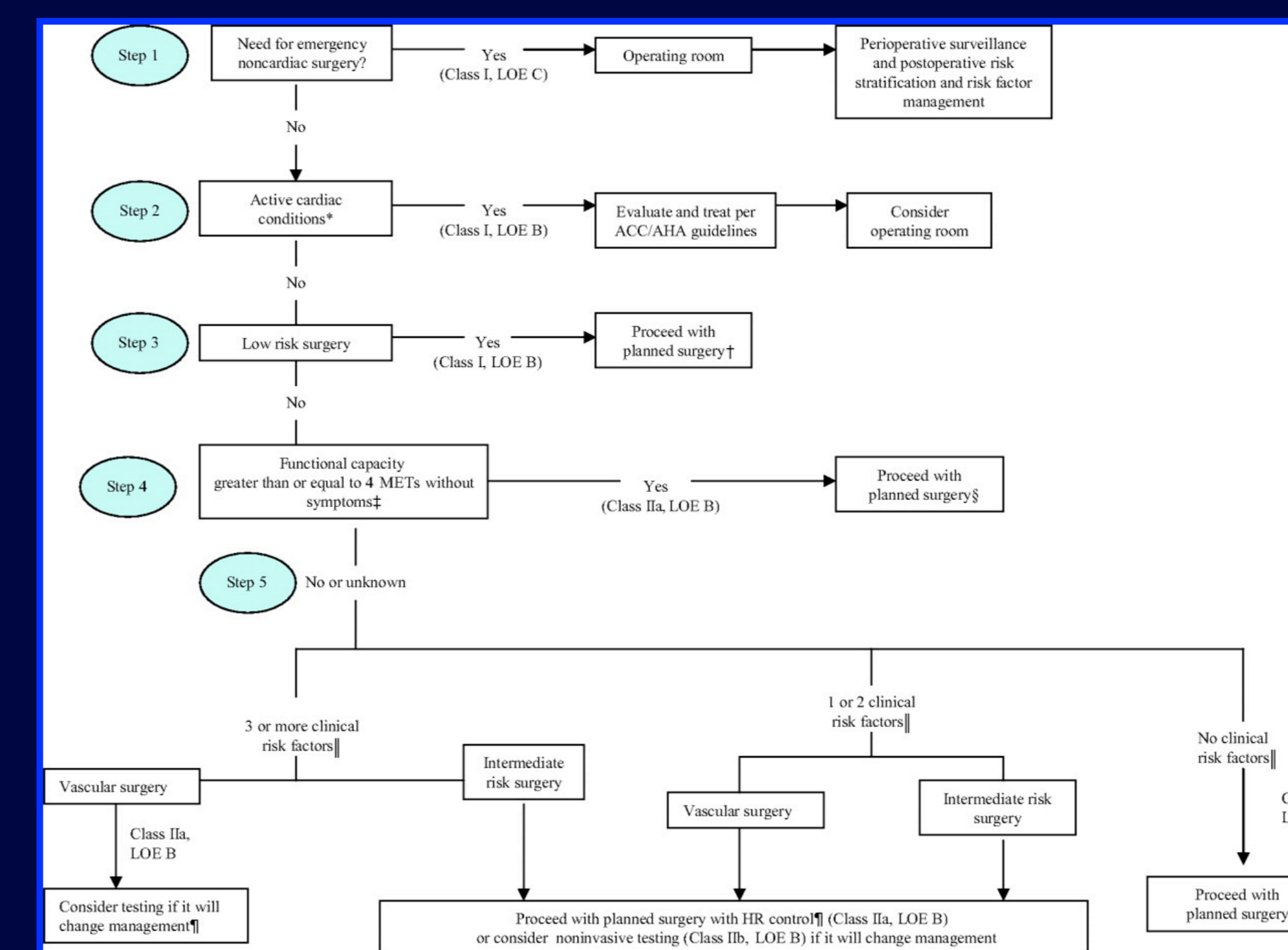
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Purpose

Adherence to recent guidelines regarding perioperative management for noncardiac surgery has been proven effective in ameliorating outcome and shares a favorable impact on health economics. Nonetheless, common guidelines are rarely implemented in everyday clinical practice. We looked at the specific adherence in an Italian secondary-care Hospital as part of an appropriateness institutional program.

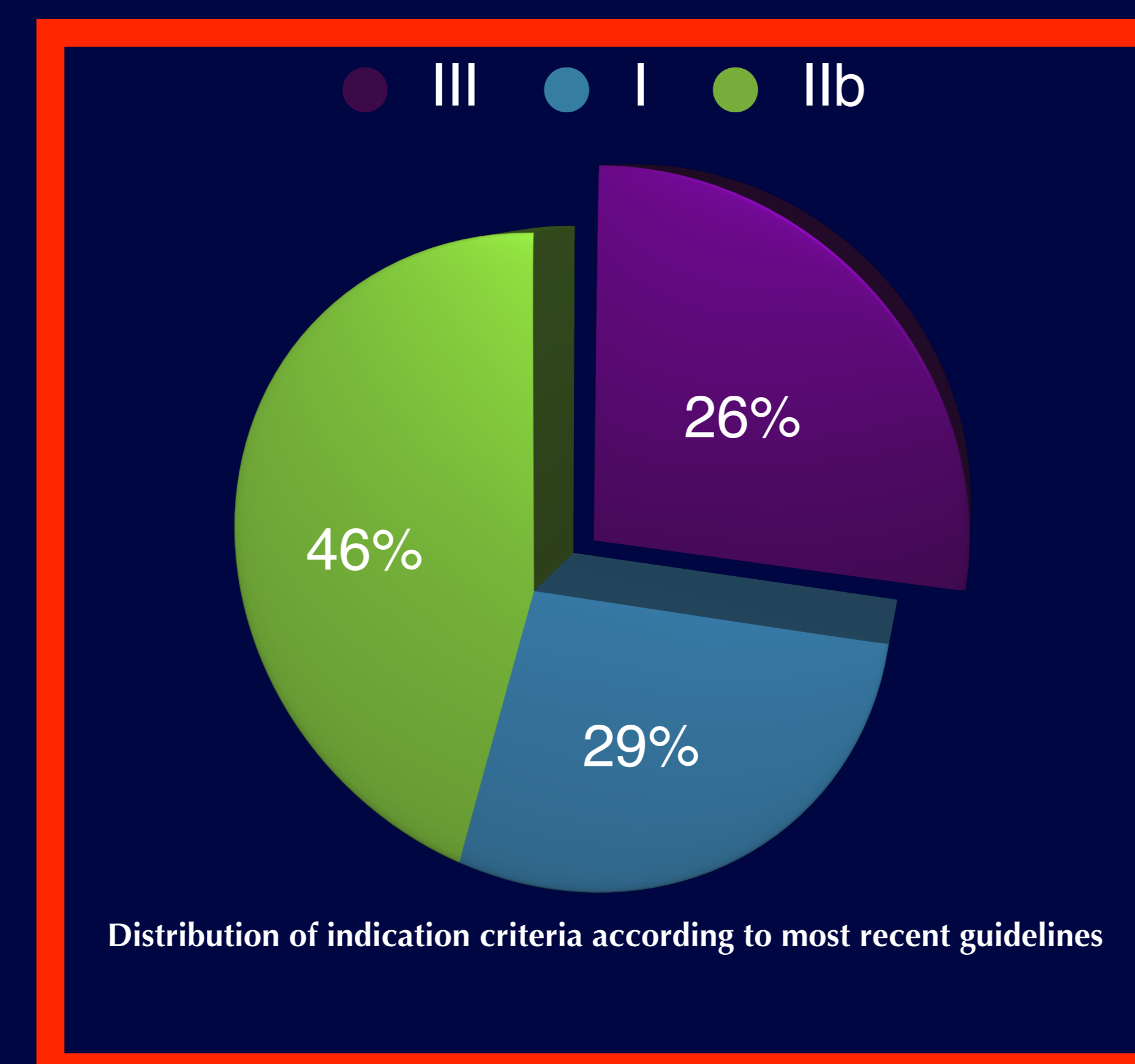
Method

During the first 11 months of 2009 35 patients (p) were referred to our Nuclear Medicine Unit after cardiology office consultation that was obtained prior to surgery (61% vascular, 11% orthopedic, 11% abdominal, 8% urology, HEENT and others, 9%). In order to determine the effective need for SPECT myocardial perfusion imaging (MPI), an additional combined evaluation by a hospital cardiologist and nuclear medicine physician was carried out following the ACC/AHA 2007 perioperative guidelines and the 2009 ACC/ASNC/ACR/AHA/ASE/SCCT/SCMR/SNM appropriateness criteria.



Results

9/35 (26.5%) patients were judged as having a class III indication whereas the sole evaluation of functional capacity was needed perioperatively (6/9 p prior to low/intermediate risk surgery). In 10 p (29.5%) SPECT MPI had a class I indication (72% vascular surgery), and in 16 (45%) p had a class IIB, LOE B indication whereas SPET MPI could have changed management strategy.



Conclusions

In our experience outpatient consultation **adherence** to specific guidelines and to appropriateness criteria for SPECT MPI prior to noncardiac surgery is still woefully **low**, especially in the presence of low/intermediate risk surgery. **Our** systematic **approach avoided unnecessary radiation exposure and was cost-effective**. However, when used for accountability, as in the Italian Health System, these criteria should be used in conjunction to quality improvement systems.