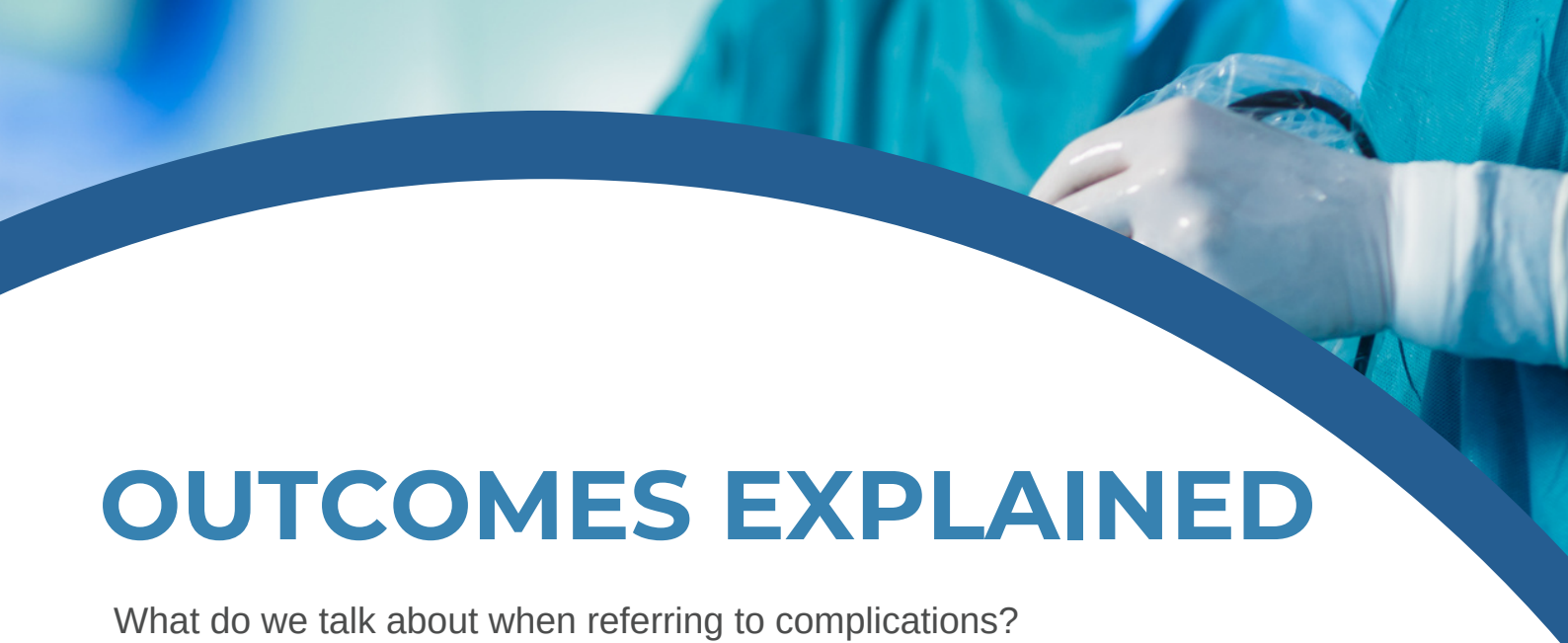




OUTCOMES EXPLAINED

What do we talk about when referring to complications?

No surgical procedure is ever without risk. Managing and understanding complications lead to better care for all. It also leads to the prevention of future complications.

In surgery we use a system for reporting complications, called the Clivien Dindo Classification. In very simple terms, a **minor complication** refers to an outcome after surgery that can be managed conservatively or with medication, like nausea or pain. You can imagine that minor complication rates for complex surgical procedures like bariatric surgery are common.

Major complications refer to an outcome that needs a secondary procedure of endoscopy to correct or treat. This can include a patient who has a serious bleed after the procedure, requiring a second operation to control the bleeding. It can also refer to any patient that needs intensive care after a procedure for complications such as a pulmonary embolism or myocardial infarction, which has to be managed in an ICU or high-care setting.

We expect a minor complication rate in bariatric surgery of **10-20%** and a major complication rate of **4-10%**.

In our practice we aim for a minor complication rate below **10%** and a major complication rate below **5%**. To get there we have to track and analyse our patients' outcomes and understand why certain outcomes occur. I believe this process will serve to improve all our patient outcomes in the future!

