

Routine testing for COVID-19 can make surgery safer: study

November 12 2020



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Routine testing patients for COVID-19 before major surgery could reduce the risk of respiratory complications and save lives, a new study reveals.

Researchers working together around the world found that using a nasal swab test to confirm that asymptomatic patient were not infected with SARS-CoV-2 was associated with a lower rate of post-operative complications. The main benefit was seen before major [surgery](#) and areas with a higher rate of COVID-19.

Swab testing gave opportunity for surgeons to identify asymptomatic infected patients and postpone their operation, avoiding the severe risk of COVID-19 complications after surgery. Routine testing also helped to prevent cross-infection from patients with no symptoms to other elective surgical patients upon admission to [hospital](#).

Led by researchers at the University of Birmingham, the COVIDSurg Collaborative comprises of experts from over 130 countries. The group has published its findings today in the *British Journal of Surgery* and is calling for pre-operative swab testing for all patients as part of a broader strategy to continue surgery safely during the pandemic.

The collaborative is backing this call with the launch of a dedicated 'toolkit' that will help hospitals and [healthcare providers](#) around the world to get elective surgery 'up-and-running' again, after more than 28 million procedures were postponed in the first phase of the global pandemic.

Collaborative lead Dr. Aneel Bhangu, from the NIHR Global Health Research Unit on Global Surgery, at the University of Birmingham, commented: "Our findings demonstrate major variation between countries in the application of preoperative testing. Whilst a clear benefit to testing was seen, just 1 in 4 patients were screened for infection. This illustrates the need for global expansion and standardisation of swab testing worldwide.

"Preoperative swab testing should not be considered in isolation, but as

part of a broader plan to minimise risks for patients, including setting up COVID-19 free surgical pathways in all hospitals performing elective surgery. For [major surgery](#) one serious postoperative complication was avoided for every 17 tests performed. We urge care providers to provide a routine swab [test](#) for all patients undergoing elective surgery whether or not they have symptoms."

The COVIDSurg toolkit will support individual hospitals, regions, and countries during a major global reorganisation of surgical services during the pandemic and beyond, by:

- Summarising published data to support safe surgical practice;
- Guiding effective surgical recovery plans; and
- Creating a five-year vision of safe and effective surgery that addresses global challenges, including shortfalls in access to surgery that existed before the pandemic.

Dr. James Glasbey, study lead at the University of Birmingham, commented: "Surgery is an essential part of all health systems. On average, you will undergo 3 to 4 operations during your lifetime. Surgery remains the cure for most cancers and underpins the treatment of many non-infectious diseases.

"Our new toolkit will help everyone involved in surgical planning over the next 5 years, including providers, healthcare leaders, patients, governments, financiers and industry. It addresses global challenges, but is locally adaptable to hospitals and environments with varying access to resources.

Before the COVID-19 pandemic, 5 billion people lacked access to surgical care and 143 million more operations per year were required globally. There was already a major global inequity in access to safe and affordable surgery across low and middle-income countries, with an

urgent need to expand capacity.

This pandemic has acutely worsened that situation and placed a spotlight on the need for change in how surgery is delivered. Launched in March 2020, the COVIDSurg collaborative has provided data needed to support this change in the fastest time frame ever seen by a surgical research group, with data from 150,000 patients across 2000 hospitals collected over the past 9 months.

Last month in their previous report, COVIDSurg researchers called for hospitals to set up 'COVID-19 free' zones for surgical patients to help save lives during the second wave of the pandemic—reducing the risk of death from lung infections associated with [coronavirus](#).

They found that that patients who had their operation and hospital care in 'COVID-19 free' areas had better outcomes—improving the safety of surgery by having a strict policy that no patients treated for COVID-19 were mixed with those undergoing surgery.

More information: A copy of the global toolkit can be downloaded at redcap.link/siureport

Provided by University of Birmingham

Citation: Routine testing for COVID-19 can make surgery safer: study (2020, November 12) retrieved 25 December 2022 from <https://medicalxpress.com/news/2020-11-routine-covid-surgery-safer.html>

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