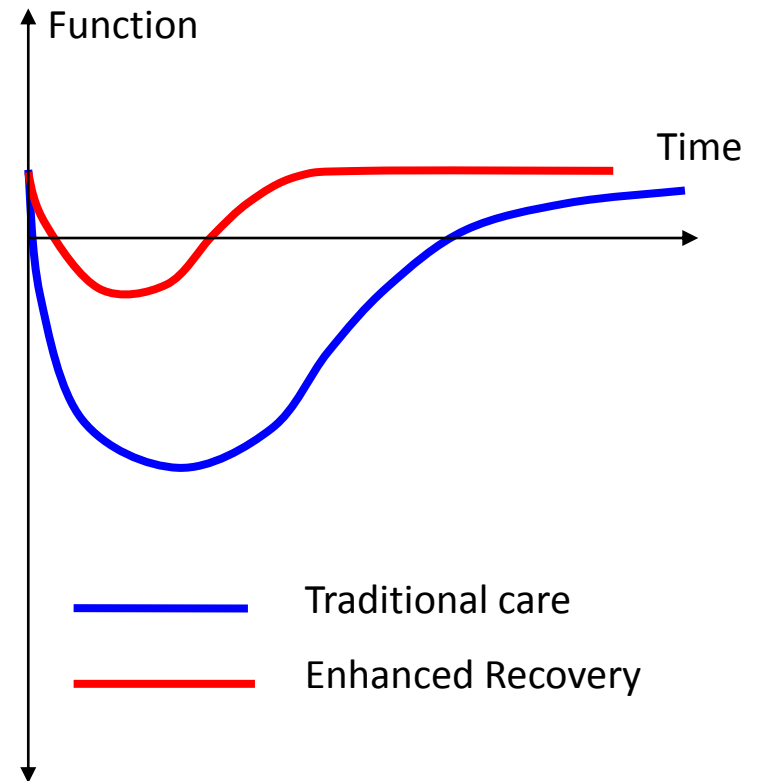


Audit of
Enhanced
Recovery with
Integrated
Care
Assessment
in **Head and Neck Cancer Surgery**

Andrew S McLennan
Royal Devon & Exeter NHSFT

What is ERICA?

- Minimise stress responses during & after surgery
- Optimise pre-op condition
- Optimise peri-operative care
- Optimise post-op rehabilitation



What led to ERICA?

- Retrospective audit - high incidence of morbidity and mortality led to introduction of ERICA
- Concept of ERICA was gradually introduced with view to improve service provision and patient care
- Prospective audit - to quantify outcomes

Stages of ERICA

Pre-op:

- Rapid pre-assessment with dedicated team trained nurses
- Email surgeon & anaesthetist
- BP / ECG / Cardiac testing/ ECHO / Bloods / HBA1c
- Dental assessment – Restorative Consultant
- Early smoking cessation referral
- GP input re alcohol cessation
- Dementia – early 3 point mini-cog assess & POPS review
- Anxiety and depression scoring & Psych input*
- Early MUST scoring and dietician input
- Pre-load CHO drinks

Stages of ERICA

Intra-op:

- Admit on day of surgery
- Reduced tracheostomy
- Simultaneous operating
- Individual fluid monitoring (LIDCO/MASIMO)*
- Temperature control
- Glucose and Lactate

Stages of ERICA

Post-op:

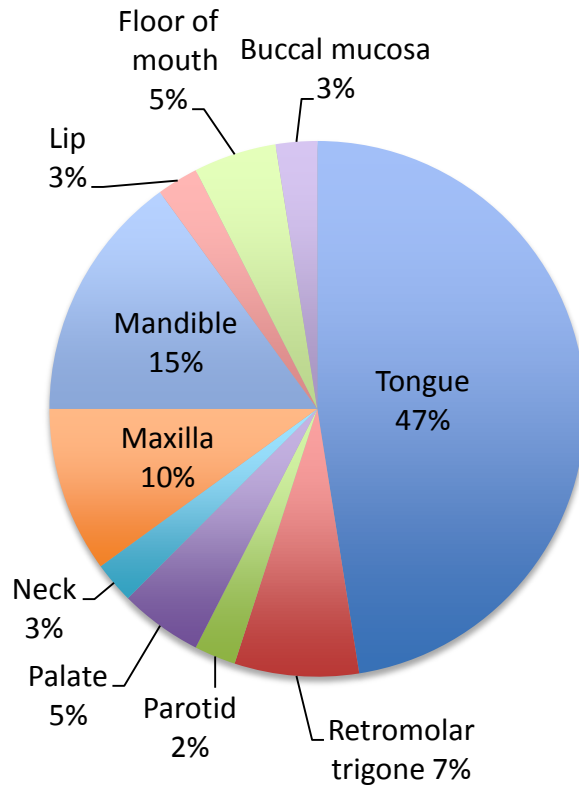
- Operating notes proforma
- Free flap monitoring chart
- Ward progress document
- Daily Consultant review
- Early OT assessment and Discharge plan
- Patient diary
- Discharge pack

Audit data

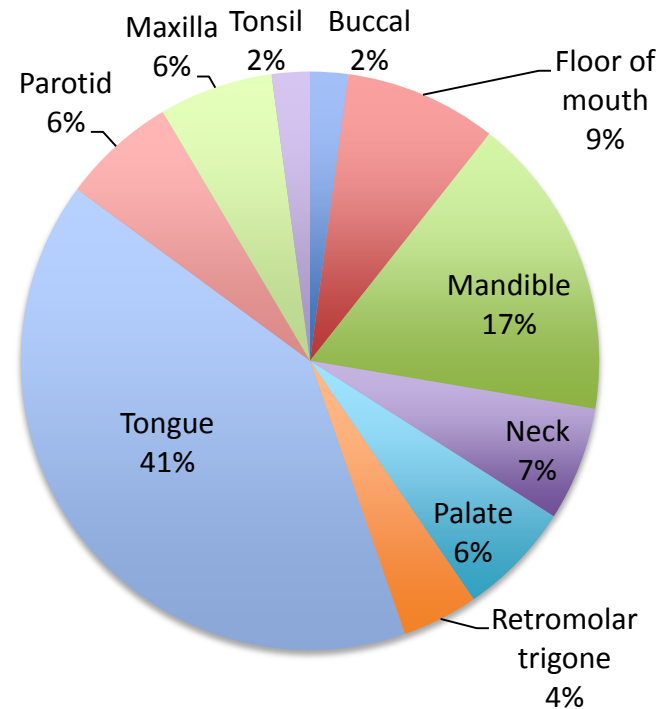
	Pre-ERICA	Post-ERICA
Duration	Oct 2014-15	Mar 2016-17
No. patients	40	47
Avg. age	60 - 70 years	70 - 80 years

Site of primary tumour

Pre-ERICA

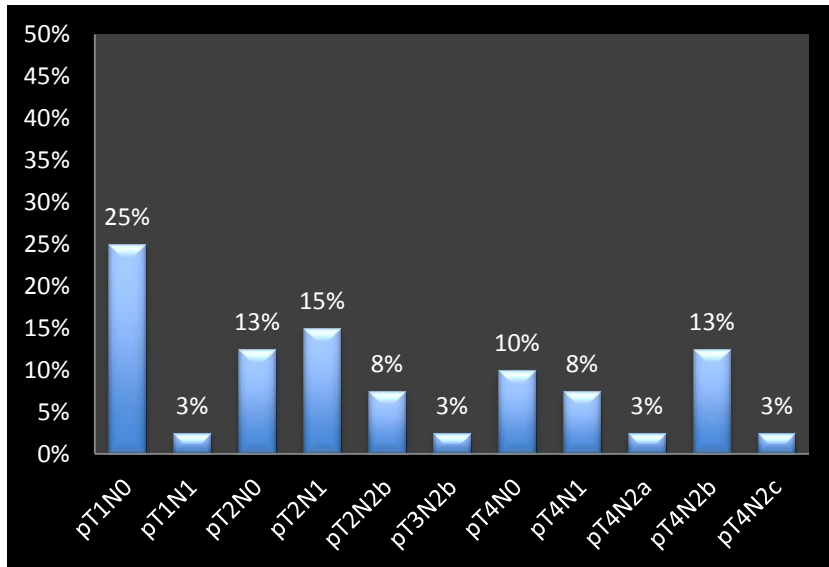


Post-ERICA



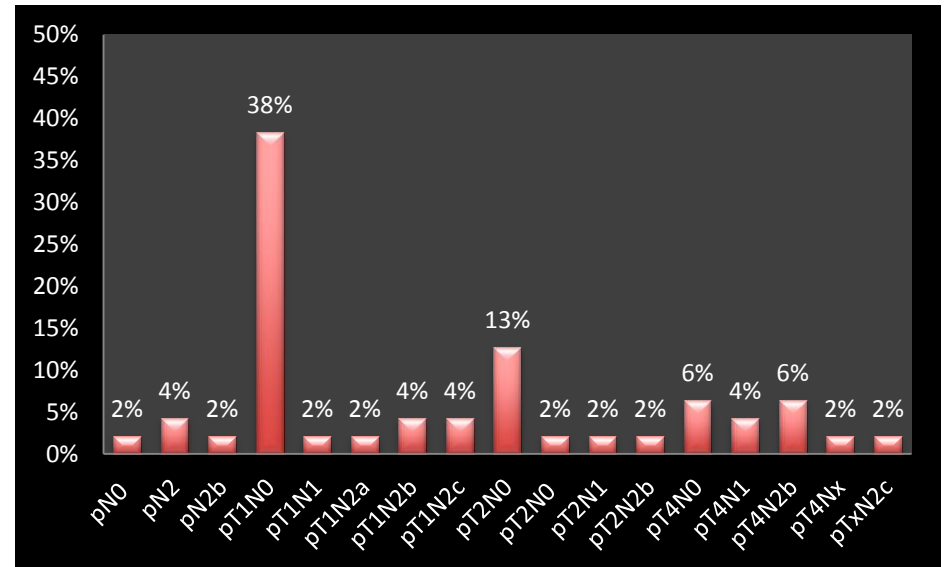
Stages of tumour

Pre-ERICA



pT1N0 > pT2N1 > pT2N0 > pT4n2B

Post-ERICA



pT1N0 > pT2N0 > pT4N0 > pT4n2B

Reconstruction

	Pre-ERICA	Post-ERICA
Free flaps	27%	6%
Distant pedicled flaps	6%	13%
Local pedicled flaps	40%	43%
Laser/neck dissection alone/others	27%	38%

Complications

	Pre-ERICA	Post-ERICA
Overall complications	50%	34%
Medical complications	27%	9%
Surgical complications	32%	25%

Surgical complications

	Pre-ERICA	Post-ERICA
Return to theatre	20%	4%
Re-anastomosis	5%	0
Free flap failure	2 of 11	0 of 3
Partial flap dehiscence	10%	8%
Wound infections	7%	2%
Haematoma	3%	4%
Oro-cutaneous fistula	0	2%

Morbidity and mortality

	Pre-ERICA	Post-ERICA
Hospital stay	16 days	10 days
Tumour recurrence (recorded at 3 months post- each audit)	32%	15%
Mortality (recorded at 3 months post- each audit)	28% (23% died from recurrence)	9% (6% died from recurrence)

Conclusion

- **Reduction** in length of hospital stay by **6 days**
- **Reduction** in return to theatre by **16%**
- **Reduction** in overall complications by **16%**
- **Reduction** in surgical complications by **7%**
- **Reduction** in medical complications **18%**
- **Reduction** in disease recurrence by **17%**
- **Reduction** in mortality by **18%**