Day case surgery and obesity: a changing perspective

Editor—The practice of anaesthetizing morbidly obese patients as day cases has changed radically in recent years. We would like to add a slightly different perspective on this issue to that expressed by Ryan and colleagues.1 There is no evidence of significant morbidity in the immediate postoperative period when treating morbidly obese patients as day cases.2 The Association of Anaesthetists of Great Britain and Ireland have recommended that obese patients should not be excluded from day surgery based on their body mass index (BMI) alone.3

It is the standard practice in our hospital trust to accept morbidly obese patients for day surgery where management would not be modified if admitted as an inpatient. All patients booked for a procedure in the Day Surgery Unit undergo a nurse-led preoperative assessment, but an experienced anaesthetist reviews the notes of patients with a BMI of more than 36 kg m−2. Between September 2003 and June 2005, the Day Surgery Unit increased its caseload by 13%. Of the 6940 patients with a known BMI, 434 (6.2%) patients had a BMI of >35 (an increase of 68%), 117 (1.7%) had a BMI >40, and 16 (0.2%) were >45. There were fewer unplanned admissions in patients with a BMI >35 (1.2%) when compared with those with a BMI <35 (2.7%), but this did not reach statistical significance.

The obese patient presents specific challenges to both surgeons and anaesthetists. The adverse events are as likely to occur in an inpatient setting as in a day case setting. Although an increased risk of adverse events intraoperatively and in the immediate recovery period in obese patients has been reported, these have not been shown to significantly increase unplanned admissions.4 Avoidance of hospital admission by choosing ambulatory surgery should therefore result in improved patient satisfaction and significant cost savings without compromising clinical care. Where patients have access to appropriate preparation and expertise, obesity alone should not exclude patients from ambulatory surgery and the latter may offer some benefits over inpatient admission.

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