



Press Release

Issued: 21 January 2021

UNDER STRICT EMBARGO until 23:30 GMT Thursday 21 January 2021

Better post-surgery care would dramatically improve cancer survival

Patients' chances of survival after cancer surgery is strongly linked with the standard of post-operation hospital care, a major international study suggests.

Patients in low-and lower-middle-income countries were up to six times more likely to die from complications within 30 days of surgery compared with those in high-income countries, the report said.

Hospitals in these countries were found to be less likely to have post-surgical facilities or care plans in place.

Investing in appropriate recovery and ward space, trained staff, early warning systems and critical care facilities would result in much improved surgical care and reduce the number of deaths, experts said.

In the largest study of its kind, researchers from the Universities of Edinburgh and Birmingham examined data for nearly 16,000 patients in 428 hospitals across 82 countries who underwent surgery for breast, bowel and stomach cancer between April 2018 and January 2019.

Surgery is an important part of cancer treatment with 80 per cent of cancer patients undergoing a procedure.

Stomach cancer patients who underwent surgery were three times more likely to die in low and lower-middle income countries than those in high-income countries.

It was four times more likely for bowel cancer patients in low and lower-middle-income countries to die than those in high-income countries.

There was no difference in deaths between countries for patients who underwent breast cancer surgery.

Complications following surgery are common, but hospitals that provide a high standard of post-operative care had the best outcomes, even when treating late stage cancers, the study found.

Low- and lower-middle-income-countries that had post-operative care facilities in place were associated with seven to ten fewer deaths per 100 complications.

The research, published in *The Lancet*, has been funded through the National Institute for Health Research Global Health Unit in Global Surgery.

The team only looked at early outcomes following surgery, but, in future, they plan to study longer-term outcomes and other cancers.

Professor Ewen Harrison, Professor of Surgery and Data Science, University of Edinburgh, said: "Rich and poor countries alike have talented surgeons and anaesthesiologists, but low resource countries do not have the infrastructure to support the complications that occur during surgery. We now know this can have a major impact on whether or not a patient survives."



@EdinburghUni



edinburghuniversity



@UniversityOfEdinburgh



@university-of-edinburgh

**For further information, please contact: Shane Canning, Press and PR Office, 0755 782 0266,
shane.canning@ed.ac.uk**