In this section we will highlight some of the many articles published internationally on topics around ambulatory surgery.

Please send details of any articles you feel should be included via webmaster@iaas-med.com.


**Message:** Between 1996 and 2006 the number of knee arthroscopies increased by 49%. 99% of arthroscopic procedures were performed in an outpatient setting. In 2006 the knee arthroscopy rate in the United States was more than twofold higher than in England or Ontario, Canada.


**Message:** 335 patients filled out a questionnaire recording pain pre- and postoperatively. Procedures done were inguinal hernia repair (IHR), arthroscopic procedures (AS) and cosmetic breast augmentation (CBA). Pain and mobility impairment were procedure-specific up to 4 weeks post-operatively.


**Message:** For medical students consultations were more stressful in ambulatory than in the more familiar in-hospital setting. Women showed greater subjective stress levels than men, whereas men exhibited greater physiological stress levels. Further studies should explore the effects of these stress responses on the diagnostic skills of students.


**Message:** Open inguinal hernia repair was performed on 151 patients 65 years and older. After excluding patients because of lack of postoperative company (16%), unwillingness to participate (13%) and medical conditions (10%) all outpatients were discharged home as planned and none was readmitted to the hospital. Ambulatory surgery was safe and well accepted by older, medically stable patients.


**Message:** Between 2007 and 2009 98 patients underwent thoracic surgery (mediastinoscopy, lung biopsies and others). 3.1% were hospitalized right after surgery, 3.1% after discharge. There were no deaths. Thoracic surgery can be performed safely and effectively as day surgery procedures.


**Message:** 343 open renal and bladder procedures were performed by a pediatric urologist between 2003 and 2009. 4 children had to be hospitalized within 48 hours. Thus nephrectomy, pyeloplasty and ureteral reimplantation seem to be excellent outpatient procedures for most children.

**Stapled hemorrhoidopexy as a day-surgery procedure.** Cosenza UM, Masoni L, Conte S, Simone M, Nigri G, Mari FS, Milillo A, Brescia A. 2011


**Message:** Over 11,000 consecutive orthopaedic surgeries were monitored for surgical site infections (SSI) over 5 years. The overall infection rate was 0.33%. Surgery time and duration of anesthesia administration were also associated statistically with SSI.

Abdominal myomectomy – a safe procedure in an ambulatory setting. Thomas, Robin L. *Fertility and Sterility.* November 2010; 94(6): 2277–2280

**Message:** Efficacy and safety of minilaparotomy myomectomy was to be evaluated in an ambulatory setting. One hundred eighty-nine women desiring fertility with symptomatic uterine leiomyomata were treated by minilaparotomy myomectomy. Mean operative time was 73 minutes. On average, patients required 3.5 hours of recovery time. Thus, minilaparotomy myomectomy can be accomplished in an outpatient setting with minimal blood loss, fast recovery time, and a low complication rate.

**Message:** Day surgery for breast cancer is safe, with equivalent complication rates. However, there is lack of evidence from randomised controlled trials. Patient satisfaction and psychological well-being is high. This needs to be confirmed by patient questionnaires.


**Message:** The aim of the study was to compare a sevoflurane-based anesthetic with a propofol-based technique. 179 pediatric patients were scheduled for ambulatory dental surgery using a double-blind and randomized trial design. The use of sevoflurane significantly increased both the risk of PONV and the number of postoperative nursing interventions. In contrast, a propofol-based anesthetic technique did result in significantly less PONV and fewer postoperative nursing interventions.


**Message:** The postoperative analgesia of three different concentrations of levobupivacaine was compared in children undergoing inguinal hernia repair (ilioinguinal/iliohypogastric(II/IH) block). A nerve block using 0.4 mL/kg of 0.25% levobupivacaine provided satisfactory postoperative pain relief after inguinal herniorrphy.


**Message:** An outpatient procedure of inserting a suprapubic catheter (SPC) is safe and feasible in most patients, and its widespread use would produce considerable cost savings.


**Message:** At present, day-surgery accounts for approximately 50% of elective surgery in Finland. Finnish public hospitals have succeeded in providing good-quality care, and there still seems to be potential to increase the share of day surgery.


**Message:** The percentage of cosmetic procedures performed in an outpatient setting was as follows: dermatology (48%), plastic surgery (38%), general surgery (4%), otolaryngology (3%), ophthalmology (3%), facial plastic surgery (1%), family practice (1%), pediatrics (1%), and internal medicine (1%). Most cosmetic procedures were performed on white, female patients in the 40- to 59-year-old age group. Chemical peels and soft tissue fillers were the two most common procedures.