Is type-and-screen testing justified as a pre-operative investigation for benign hysterectomies?



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Background

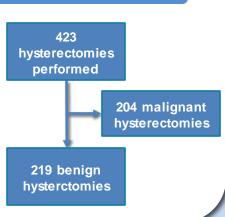
- Current Christchurch Women's Hospital (CWH) guidelines state that type-and-screen testing is required for all women undergoing benign hysterectomies.
- It has been suggested that procedures with a transfusion rate of over 5% or 0.3 units per case may be appropriate for pre-operative typeand-screen testing¹.
- The cost of a type and screen test is estimated at 22 NZD.

Aim

- To determine the local transfusion rate for women undergoing benign hysterectomies at CWH.
- To identify predictive factors for transfusion among our cohort which could be used in the development of a new local guideline.

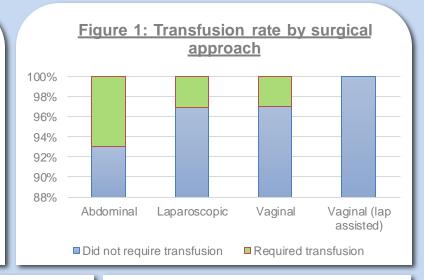
Methods

- Retrospective audit of all hysterectomies from 01/08/2018 to 31/07/2019.
- We reviewed electronic operation notes, discharge summaries, laboratory and imaging results for 423 patients.
- We excluded patients who had surgeries performed either for the diagnosis or treatment of malignancy.



Results

- 95% of patients had a type-and-screen test performed as part of their pre-operative workup.
- 9/219 patients (4.1%) required a transfusion.
- Only 2 (0.9%) of patients received a transfusion on the day of their surgery.
- Patients requiring transfusion received a maximum of 2 units.
- Larger uterine size (282mls vs 250mls) on ultrasound scan and lower preoperative haemoglobin (128g/L vs 137g/L) was found among the transfused cohort compared to the non-transfused cohort.



Discussion

- Given the low rate of blood transfusions required there is insufficient evidence to justify a routine type-and-screen investigation prior to benign hysterectomy.
- This has the potential to produce substantial cost savings for the Canterbury District Health Board.
- The small number of patients receiving transfusion means that this audit is underpowered to find any statistically significant predictive factors for requiring a transfusion.
- A new guideline for patients requiring type-and-screen testing was developed based on predictive factors described by Pepin et al. derived from logistic regression analysis².

Recommendations

A proposed guideline for patients requiring typeand-screen testing prior to benign hysterectomies:

- Age > 65
- Patients with known clotting disorders or anticoagulated
- Pre-operative Hb <110
- ASA score of 4 or 5

Poforonces:

1. Dexter, F., Ledolter, J., Davis, E., Witkowski, T. A., Herman, J. H. and Epstein, R. H. (2012) 'Systematic criteria for type and screen based on procedure's probability of erythrocyte transfusion', *Anesthesiology*. The American Society of Anesthesiologists, 116(4), pp. 768–778. doi: 10.1097/ALN.0b013e31824a88f5.

2. Pepin, K. J., Cook, E. F. and Cohen, S. L. (2020) 'Risk of Complication at the Time of Laparoscopic Hysterectomy; A Prediction Model Built from The National Surgical Quality Improvement Program Database', American Journal of Obstetrics and Gynecology. doi: 10.1016/j.ajog.2020.03.023.