STS Measure – Operative Mortality for Esophageal Resection

Title	Esophageal Resection – Operative Mortality for Esophageal Resection
Description	Percentage of patients who underwent esophageal resection surgery for esophageal cancer who suffer an operative mortality.
Denominator	Number of patients who underwent esophageal resection surgery for esophageal cancer.
Denominator Time Window	12 months
Numerator	Number of patients who underwent esophageal resection surgery for esophageal cancer who suffer an operative mortality.
Exclusions	None
Rationale	Operative mortality is defined as death during the same hospitalization as surgery or within 30 days of the procedure. Measurement and outcome analysis of this quality metric for esophageal resection will drive process improvement for providers and assist patients in decision making related to esophageal cancer.
Evidence	Benchmark: 3.4% (STS Spring 2017 report) <u>Supporting evidence (excerpts from 2016 NQF submission form)</u> Esophageal cancer is an aggressive disease with a generally poor prognosis. The incidence of esophageal adenocarcinoma is increasing faster than any other malignancy in the United States. In 2015, there were an estimated 16,980 people diagnosed with esophageal cancer. Esophagectomy, a relatively high morbidity and mortality operation, remains a key therapy in treating patients with localized esophageal cancer. The 30-day mortality rate following esophagectomy ranges between 2.7% and 11%. Within the STS GTSD, 24% of patients undergoing esophagectomy for cancer experienced major postoperative morbidity or death. Those with a major morbidity had a hospital discharge mortality of 11% while those patients without a major morbidity had a mortality rate of zero. Knowing their rate of risk adjusted morbidity and mortality after esophagectomy gives thoracic surgery programs the opportunity to design quality improvement initiatives around deficiencies. Tomaszek S, Cassivi SD. Esophagectomy for the treatment of esophageal cancer. Gastroenterol Clin North Am. 2009 Mar;38(1):169-81. Surveillance, Epidemiology, and End Results Program (SEER) database. March 8, 2016. Retrieved from http://seer.cancer.gov/statfacts/html/esoph.html. Wright CD, Kucharczuk JC, O'Brien SM, Grab JD, Allen MS. Society of Thoracic Surgeons General Thoracic Surgery Database. Predictors of major morbidity and mortality after esophagectomy for esophageal cancer: a Society of Thoracic Surgeons General Thoracic Surgery Database risk adjustment model. J Thorac Cardiovasc Surg. 2009 Mar;137(3):587-95.