Trials to improve surgical outcomes

It is difficult to trial and test surgical interventions; surgical procedures are complex with many variables, all interacting and contributing to outcomes. It can be difficult for surgeons to recruit patients because of preferences, and deciding which outcomes are relevant to patients, surgeons and the NHS is also challenging.

Jane Blazeby, Professor of Surgery, has been working over the past two decades to address these issues. She leads research to improve methods to evaluate surgery and to test its effectiveness in early and later phase studies. Her work is supported by funding from the National Institute for Health Research (NIHR) Biomedical Research Centre (for which she is the Surgical Innovation Lead), the Medical Research Council Hub for Trials Methodology Research and grants from the Royal College of Surgeons.

Professor Blazeby is currently supporting a randomised controlled surgical trial for oesophageal cancer. Funded by NIHR, the ROMIO (Randomised Oesophagectomy: Minimally Invasive or Open) study compares traditional surgery used for oesophageal cancer versus keyhole surgery to assess the impact that each approach has on survival and surgical complications. Within her team, Miss Shelley Potter is leading research to evaluate surgical breast reconstruction after mastectomy for breast cancer, aiming to develop a randomised controlled trial comparing different procedures to inform clinical practice and decision-making for women.

The team is also developing better ways to provide information for patients undergoing cancer surgery and optimising informed consent for innovative and novel procedures.

www.bristol.ac.uk/population-health-sciences/centres/surgical-research/

- McNair, AGK, MacKichan F, Donovan JL et al. (2016). What surgeons tell patients and what patients want to know before major cancer surgery: a qualitative study. BMC Cancer 16:258