Inter-actions with co-morbidity

Risky drinking → Alcohol-related illness & problems
               ↓ Aggravation of treatment results of other diseases

Intervention ↓ Quit drinking
             ↓ Reduced alc-related illness & problems
               ↓ Improved treatment results of other diseases
Facts on OP and Alcohol

Moderate to high consumption + Operation = Increased complications
What complications?

- Infections
- Wound problems
- Cardiac - and lung complication
- Bleeding episodes
What patients?

- All drinking too much

- Even without liver cirrhoses or other alcohol related consumption
Why complications?

Organ dys-funtions prior to OP:

- Immune capacity
- Cardiac insufficiency
- Dys-coagulation
- Wound & Tissue healing

+ Increased OP Stress

Normalised during alcohol withdrawal

H Tønnesen Br J Anaesth 2009
ECG: Holter monitoring
(ischaemic and arrhythmic signs)
Operative Stress-Response
(Pl-noradrenaline and Pl-adrenaline)
Immune capacity at surgery

area mm²

Kontroll
Intervention

4 wk program

Br J Anaesth 2009
“Alcohol-free OP”

Colorectal Res. 4 wk program

Hip Replacement 8 wk program

Gen. surgery 1 wk program (alcohol reduction)

Oppedal Cochrane 2012
## Meta-Analysis

<table>
<thead>
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<th>ACI Ev/Total</th>
<th>Control Ev/Total</th>
<th>Intervention</th>
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</table>

\[ I^2 = 0\% \]

\[ \text{OR: 0.22 (0.08-0.61)} \]
Ongoing Studies: 6 wk programs

• Scand-Ankle (RCT)
  – Alcohol Cessation Intervention at the time of ankle fracture surgery

• STOP-OP (RCT)
  – Combined Alcohol and Smoking cessation intervention 1-2 wk prior to major bladder cancer surgery

• VIP (RCT)
  – Very Integrated Program at Alcohol/Drug addiction treatment: S+PA+OW/OB+Maln+ Co-morbidity
Ongoing Syst Reviews
Effect of Intervention

Criteria:
• Baseline data of risk-factor & condition/illness
• Follow-up data on both

• Diabetes  Cardiac insufficiency
• COPD    Psychiatric illness
• Surgery  Pregnancy

• Educating staff in lifestyle intervention
Thank You, Mahalo, Kiitos, Toda, Grazie, Obrigado, Takk, Gracias, Merci