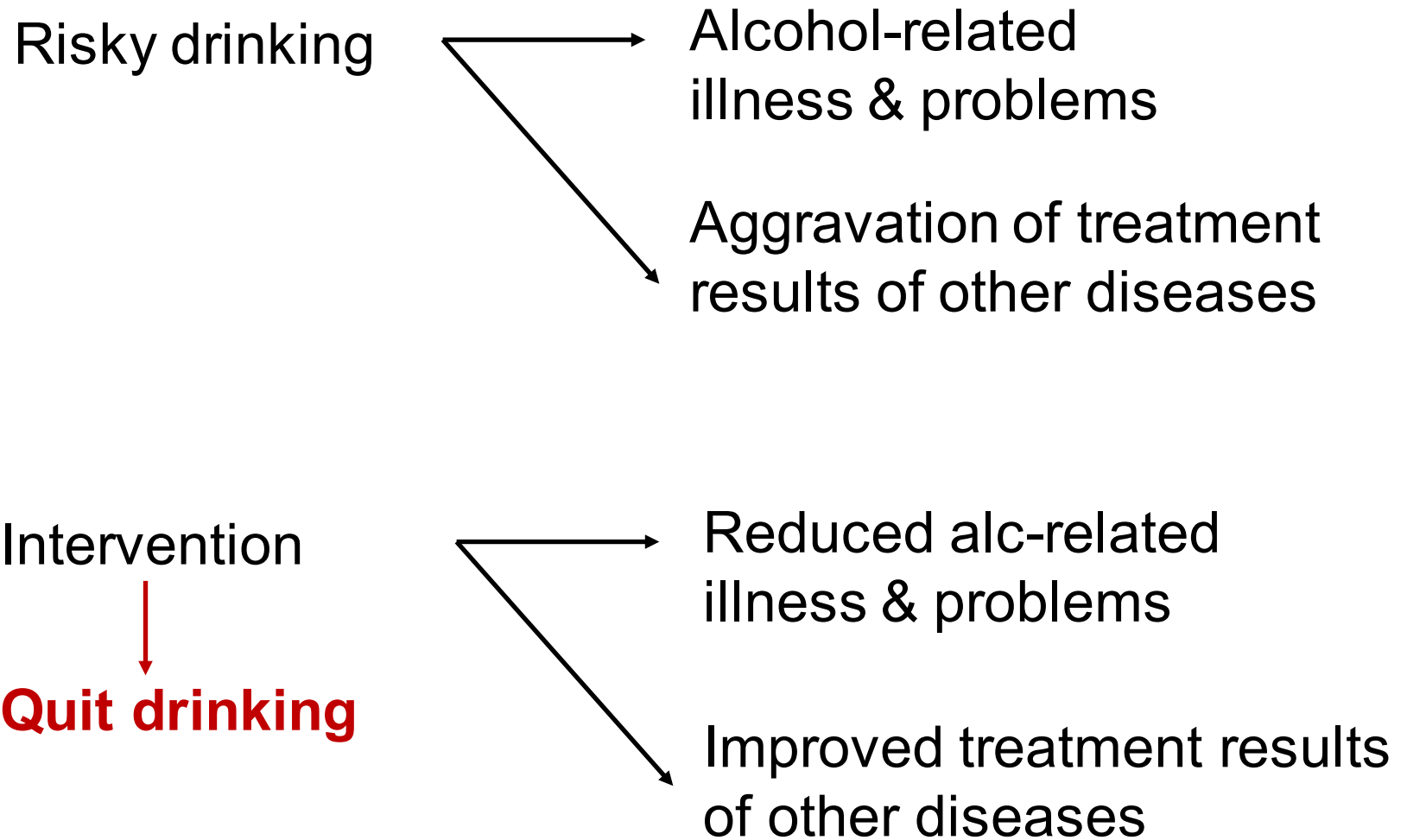




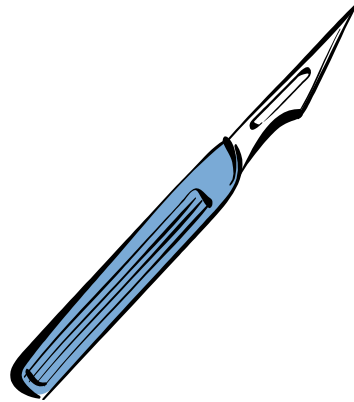
Inter-actions with co-morbidity





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 scirrhoses or other alcohol related consumption



Why complications ?

Organ dys-funtions prior to OP:

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

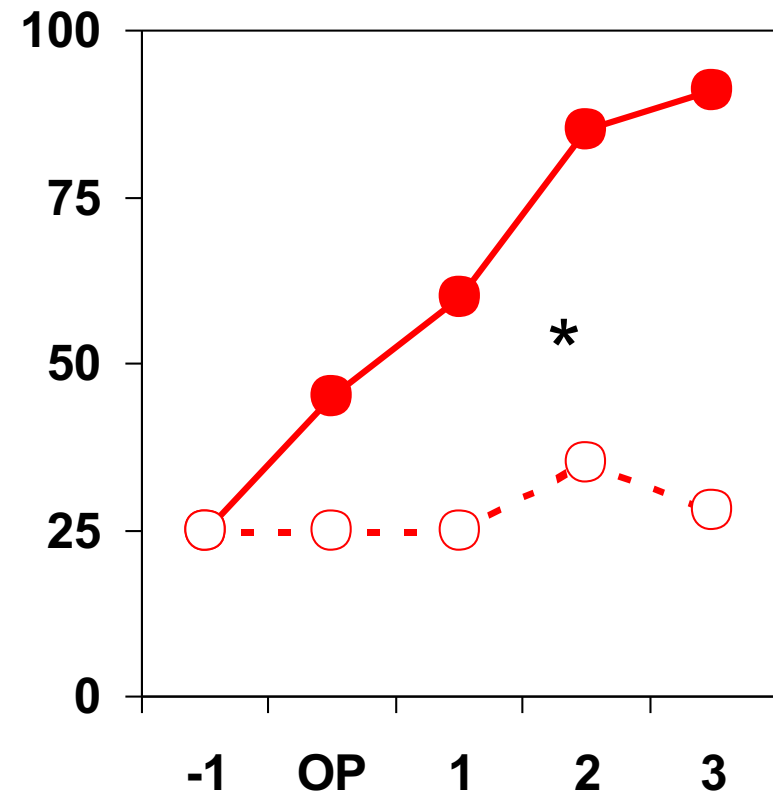
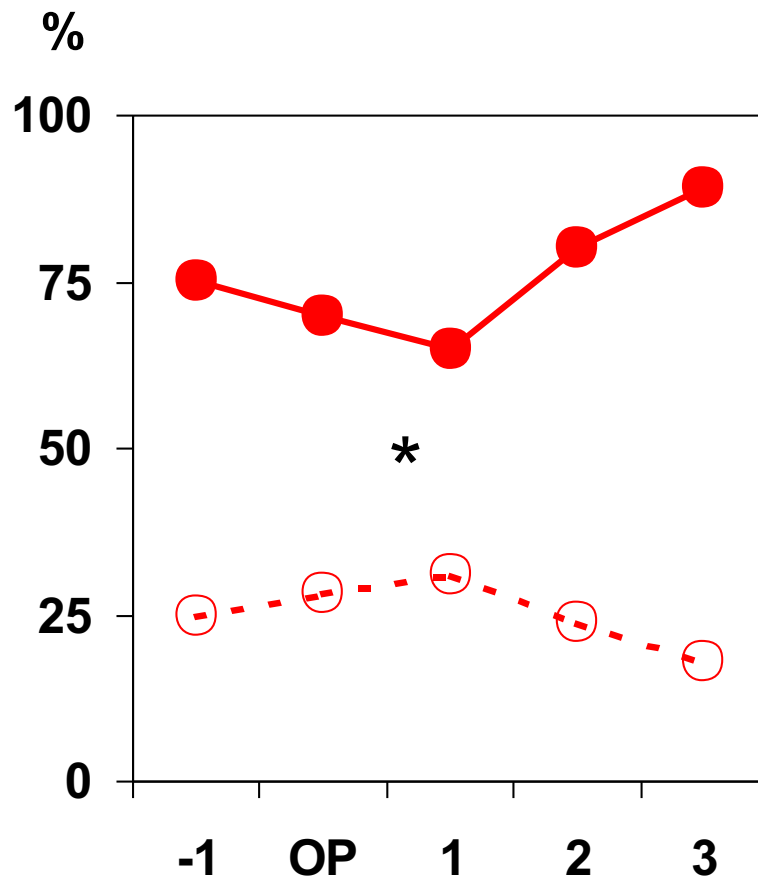
**Normalised during
alcohol withdrawal**

and OP Stress



ECG: Holter monitoring

(ischaemic and arrhythmic signs)

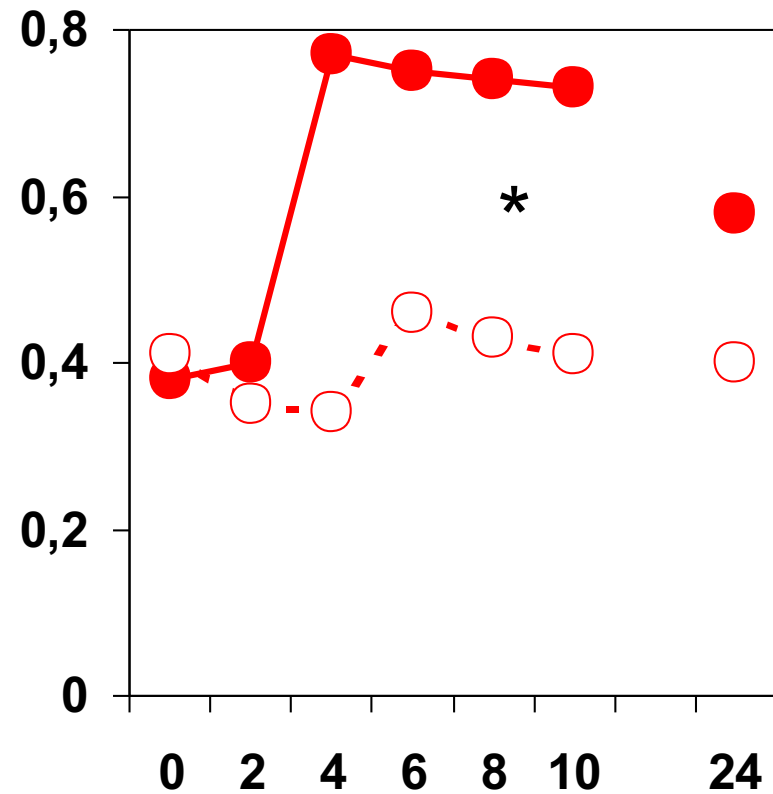
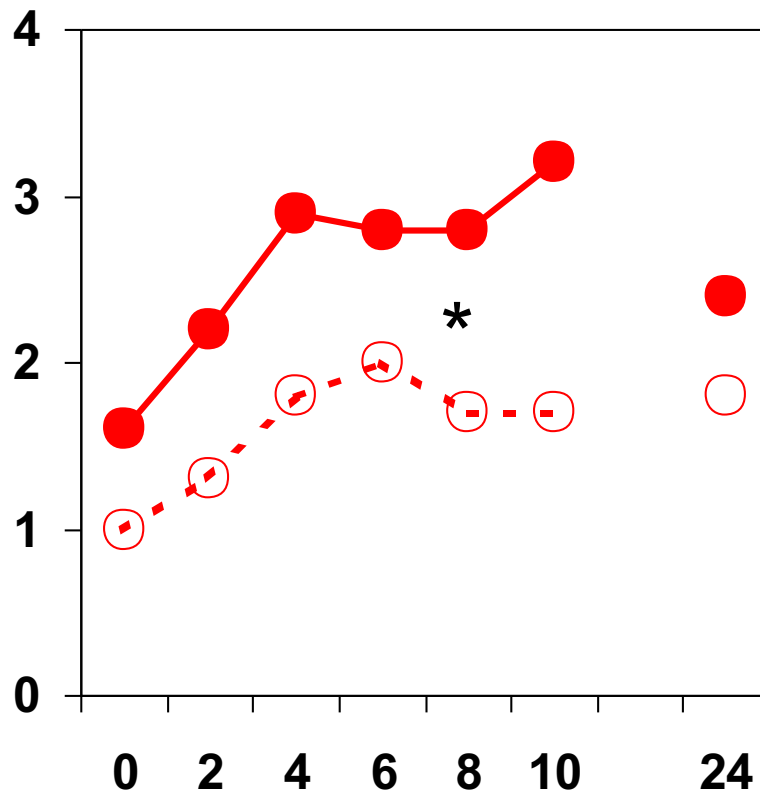




Operative Stress-Response

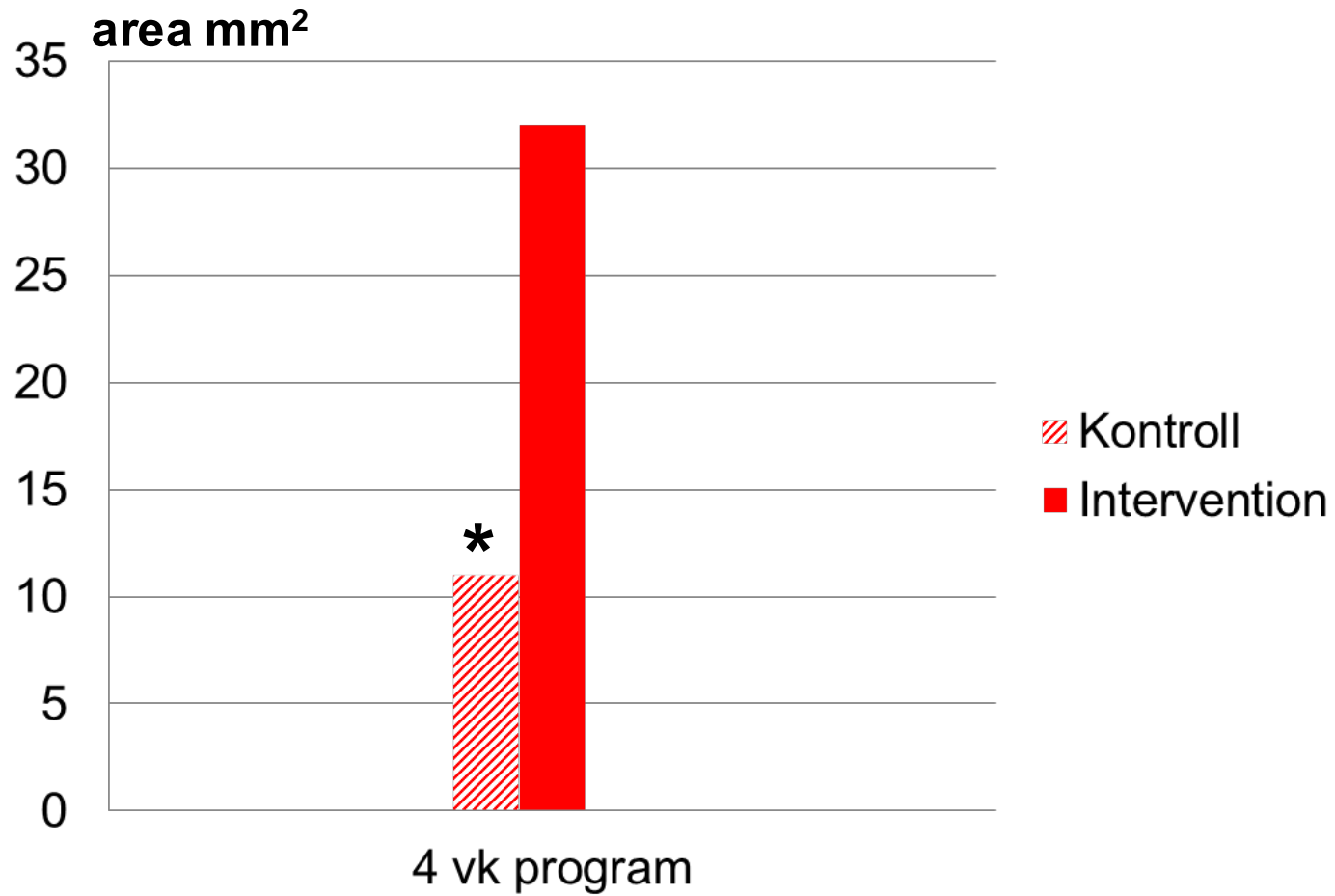
(PI-noradrenaline and PI-adrenaline)

mmol/L



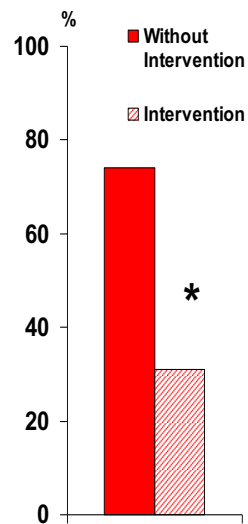


Immune capacity at surgery

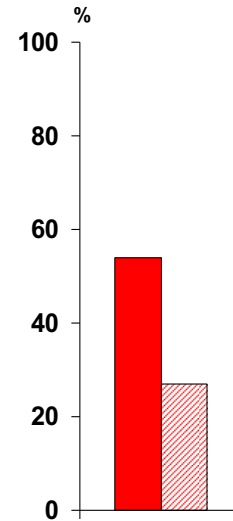




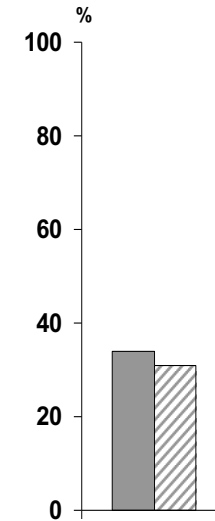
“Alcohol-free OP”



**Colorectal Res.
4 wk program**



**Hip Replacement
8 wk program**

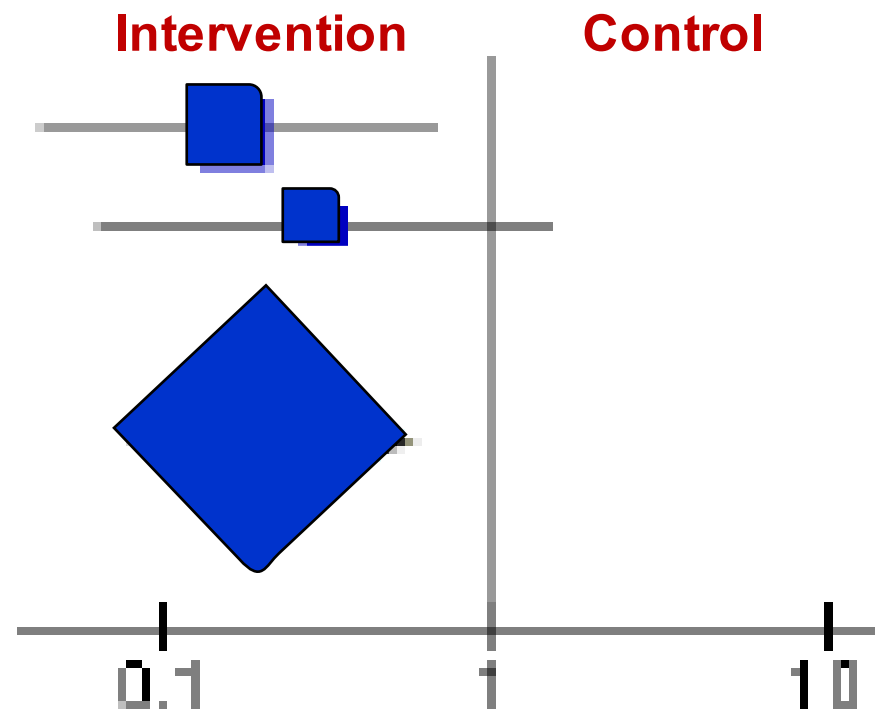


**Gen. surgery
1 wk program
(alcohol reduction)**



Meta-Analysis

	ACI Ev/Total	Control Ev/Total
Tø 1999	5 / 20	14 / 21
Tø 2002	4 / 15	7 / 13
Total	9 / 35	21 / 34
I² = 0%	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



CLINICAL HEALTH PROMOTION CENTRE

Reg
Skåne



**Thank
You**

Mahalo

Kiitos

Tack

Toda

Grazie

Obrigado

Thanks

Takk

Gracias

Merci

