

Gall bladder surgery data flawed: Study

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High injury rates linked to poor tracking, MD says

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A data system tracking injuries suffered by patients having gall bladder surgery is vague, confusing and should be revamped, a new study says.

"The recording of these things is really flawed and it's got to be cleaned up," says Dr. Bryce Taylor, a University of Toronto professor of surgery and author of a study published today in the *Canadian Medical Association Journal*.

He examined medical records made available by 18 hospitals and found that high injury rates previously reported resulted from a flawed tracking system.

Codes used by hospitals to record injuries can be interpreted in so loose and subjective a way that the precise bile duct injury rate remains unclear, Taylor says. "The problem lies in bad codes."

Intense debate, in academic circles and the media, has centred on injuries occurring in keyhole surgery, in which doctors remove a gall bladder through tiny incisions, using a video monitor to guide their instruments.

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Taylor concludes that the risk of major bile duct injury from a keyhole procedure is unlikely to be higher than in open surgery, where doctors remove the gall bladder through a wide incision in the abdomen.

"Over-all, our province's results stack up against anyone's," he said in an interview yesterday.

Earlier studies, based on coded hospital data kept at the Canadian Institute for Health In-

to measure and compare the quality of hospitals. Dr. John Marshall, chief of staff at Kingston General Hospital, writes in an editorial accompanying Taylor's study.

The idea of issuing institutional "scorecards" was endorsed by the Ontario Hospital Association. But if such rankings are to have any relevance they must be based on solid information, Marshall writes.

All 21 hospitals identified by The Star re-examined records of patients who underwent keyhole gall bladder surgery from 1991 to 1995, and 18 centres were willing to share detailed information for a study, Taylor writes. None of the hospitals is named in his research.

Since an in-depth review of all 480 gall bladder complications reported at these centres would have been a huge undertaking, he asked to see detailed records on every case described by the hospitals as involving "major" complications. There were 24 of these and Taylor found that patients had suffered harm in every case.

To assess the damage caused by "minor" complications — the vast majority — Taylor asked hospitals to deliver a random sample, representing one-sixth of their minor cases, for detailed review. He found that, of the 80 minor bile duct complications he examined, only four actually made a difference in patient outcomes.

"It can be safely assumed that such problems were indeed inconsequential because the length of stay (in the hospital) for all these patients was one or two days," he writes.

Interpreting such minor cases as injuries results in high complication rates that are "suspect" on close examination, Taylor writes.

A limitation of Taylor's finding is that participating hospitals weren't given detailed instructions on exactly how their random sampling was to be done, he notes.

"It is therefore possible that they did not select the records randomly and may have held back records that revealed complications that I would have classed as clinically relevant," Taylor writes.

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Press council accepts Star apology

The Star acted properly in apologizing once it realized that statistics it published relating to gallbladder surgery injuries were flawed, the Ontario Press Council has ruled. But the council upheld one aspect of a complaint by the Ontario Medical Association, saying The Star should have once more identified the hospitals for which it published the data.

Full story, A18

A18 THE TORONTO STAR Tuesday, March 9, 1999

Star apology proper, press council finds

But paper should have gone further after statistics proved flawed

The Star acted properly in apologizing once it realized that statistics it published relating to gallbladder surgery injuries were flawed, the Ontario Press Council has ruled.

Prior warnings about the statistics "were inadequate to prompt the writer to abandon the story," the ruling states.

But the council also upheld one aspect of a complaint brought by the Ontario Medical Association, saying The Star, in admitting the statistics were "useless," should have once more identified the hospitals for which it published the data.

Keyhole surgery used to remove gallbladder

The 1997 article headlined "The low-scar surgery with high risk," sparked the complaint by Dr. John Gray, then president of the OMA.

It related to keyhole surgery to remove the gallbladder, which is performed through a small incision in the abdomen.

It also led to a libel suit against the newspaper by surgeons at Markham-Stouffville Hospital, one of 21 hospitals for which statistics were published. The others named were

Alexandra Marine and General; Goderich; Belleville General; Cambridge Memorial; Hôtel Dieu, St. Catharines; Kingston General; McKellar General; Thunder Bay; Memorial Hospital, Bowmanville; Ottawa General; Port Colborne General; Riverside Hospital, Ottawa; Royal Victoria, Barrie; St. Joseph's, London; St. Joseph's Brantford; Stratford General; Sunnybrook Health Science Centre, Toronto; Toronto East General Orthopaedic; Trenton Memorial; Welland County General; Wellesley Hospital, Toronto; Wingham and District Hospital.

Text of the adjudication:

The Ontario Medical Association complained that The Toronto Star, in a Sept. 21, 1997, article, "knowingly" used statistics that do not represent the true incidence of bile duct injuries associated with keyhole gallbladder surgery. The story said 938 patients in more than 150 hospitals over five years from 1991 to 1995 had suffered slashed bile ducts and accidental punctures while undergoing the surgical procedure.

The OMA maintained The Star had been warned that the statistics were flawed, but the Ontario Press Council, noting the data came from the provincial Ministry of Health, is not convinced that warnings were sufficiently precise to prompt the writer not to proceed with the story.

It notes that The Star published every letter it received from physicians criticizing the article, that it later published a

comprehensive report of a study showing the statistics on which the story was based were seriously flawed, also that it reached an out-of-court settlement with three surgeons at Markham-Stouffville Hospital and published an apology in an article agreeing that relevant charts had shown there were no bile duct injuries there during the period in question.

In October, 1998, The Star published a column written by its ombudsman which said he believed the statistics purporting to show that 21 Ontario hospitals had reported higher-than-average rates of bile duct injuries from 1991 to 1995 "weren't worth the powder to blow them to hell."

Apology an acceptable way of showing regret

The Press Council believes the column, which included the ombudsman's apology and a comment from The Star's managing editor saying "We're sorry the surgeons got caught in the same trap we did," was an acceptable way of showing readers that the newspaper regretted having relied on what turned out to be flawed statistics. But it regards as a significant omission the absence from the column of the names of the 20 hospitals (besides Markham-Stouffville) for which detailed statistics were published in the original article and upholds the complaint on this point alone.