"Should lifestyle choices influence clinical decisions regarding surgery?"

Richard D Bartlett

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Defining lifestyle

"someone's way of living; the things that a person or particular group of people usually do"

- Cambridge English Dictionary



Examples of lifestyle choices















Effects of negative lifestyle choices











...but what about positive lifestyle choices?







...or extrinsic lifestyle 'choices'



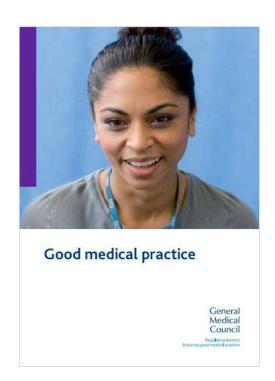




Generally GMC guidance is clear...

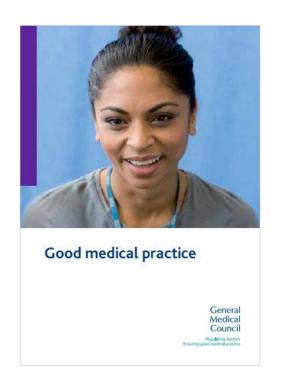
"You must give priority to patients on the basis of their clinical need"

"You must not refuse or delay treatment because you believe that a patients actions or lifestyle has contributed to their decision"





...but there are exceptions

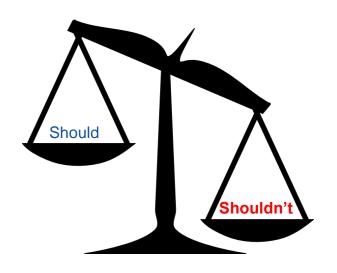


"The treatment you provide... must be based on... your clinical judgement about the likely effectiveness of the treatment options"

"Provide effective treatments based on the best available evidence"



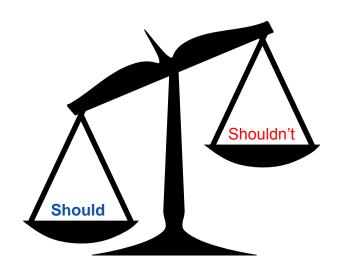
Default position: lifestyle choices **shouldn't** influence clinical decisions regarding surgery



To do so would risk **unevidenced opinions**, **prejudice** and **discrimination**



But lifestyle choices **should and must** influence clinical decisions when...



- 1. ... there is objective evidence that consideration could **enhance** individual patient outcome or minimise potential harm
- 2. ... consideration is necessary to **promote fairness and equality in a** society with finite resources



Conclusion

Lifestyle choices generally **shouldn't** influence clinical decisions regarding surgery

...but they must be considered where *objective evidence* informs <u>clinical</u> opinion that may be of benefit to either the individual patient or society





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Lifestyle choices and their relation to surgical care:

Specialities	Relevant conditions
Cardiothoracic	CABGMesothelioma – occupational hazard
General	 Bariatric surgery - obesity Gallstones – rapid weight loss (cholecystitis, pancreatitis) GI cancers – diet (fibre, red meat) Post-menopausal breast cancer (obesity) Organ transplant – liver, kidney, pancreas (smoking, alcohol) Deny elective surgery until certain BMI achieved
Neurosurgery	DBS (lower threshold for highly technical pts with PD)
Ophthalmology	• Cataracts
Oral & Max Fax	Oral cancers – smoking
Paediatric	Spina bifida
Plastics	Cleft palate (obesity/DM during pregnancy)Skin cancers (UV exposure)
Trauma & Ortho	Joint replacement surgery
Urology	• Vasectomy
Vascular	EndarectomyAmputation – diabetes



Transplant surgery

"Selection will be based primarily on risk of death without a transplant. Patients can be considered for elective transplantation if they have an anticipated length of life or survival in the absence of transplantation that is less than that obtained with a liver transplant"