EFFECTIVENESS OF DISCHARGE EDUCATION FOR PATIENTS UNDERGOING GENERAL SURGERY:

A SYSTEMATIC REVIEW AND META-ANALYSIS

a,b a a d e f a

Brigid M. Gillespie, Lukman Thalib, Emma Harbeck, Georgia Tobiano, Evelyn Kang, Steve Tobiano, Mavis Tong, Justin Clark, Bhavik Patel, Wendy Chaboyer

a National Health and Medical Research Council Centre of Research Excellence in Wiser Wound Care, Griffith University, Australia, Gold Coast University Hospital, Gold Coast Health Nursing and Midwifery Education and Research Unit, Queensland Australia, Stanbul Aydin University, Turkey, School of Nursing & Midwifery, Griffith University, Australia, Institute for Evidence-Based Healthcare, Bond University, Gold Coast, Australia, Gold Coast University Hospital, Queensland, Australia

February

2022

Nound Co

Background

Discharge education may reduce the risk of postoperative complications.

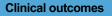
Queensland, Australia

 However, a critical evaluation of the body of evidence is needed.



Objective

 To assess the effect of discharge education interventions versus standard education given to general surgery patients prior to, or up to 30-days of hospital discharge.









Methods



Systematic Review and Meta-Analysis



- MEDLINE (Pubmed)
- · CINAHL (EBSCO)
- EMBASE (Elsevier)
- Cochrane Library

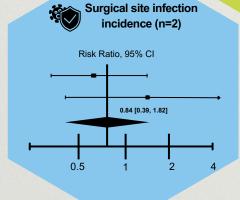


- √ Randomised Controlled Trials (RCTs)
- Non-randomised studies of interventions
- ✓ Published 2010 2022
- Adults undergoing general surgical procedures
- Receiving discharge education on surgical recovery



- Cochrane Risk of Bias 2
- Risk of Bias Assessment Tool for Nonrandomised Studies

Results n=965 RCTs (n=8) Non-randomised studies of intervention (n=2)



 Non-randomised studies of interventions were not pooled due to heterogeneity in outcome measures.

Conclusion

Discharge education may reduce the likelihood of surgical site infection and hospital readmission, but the body of evidence is inconclusive.