

EUEMEN: European Perioperative Medical Networking

Erasmus+ KA203: Strategic Partnership for higher education

BACKGROUND

Surgery is indicated to cure or palliate numerous physical ailments; however, it represents a major stress that often leads to **adverse effects** unrelated to treatment objectives that have profound negative impacts on the capacity to perform activities of daily living, subsequently **impairing quality of life**. In addition, the **longer the hospitalization** time of the patient, the greater the cost to the health system. Besides, the increasing demand for major surgery in high risk patients requires new improvements that must include a specific evidence-based approach per procedure.

Multimodal surgical rehabilitation, also known as Enhanced Recovery After Surgery (ERAS), entails the application of a series of **perioperative procedure** measures and strategies aimed at patients who are going to undergo a surgical procedure with the goal of reducing secondary stress caused by the surgical intervention and thus achieve enhanced recovery of the patient and decrease complications and mortality. ERAS protocols are care programs based on scientific evidence, encompassing all aspects of patient care and requiring multidisciplinary management, with the participation of diverse specialists. Starting at the diagnosis, their aim is to recognise patients' individual needs to optimise their treatment before, during and after surgery. The **close collaboration of all specialists** participating in the process, as well as of the actual patients and their relatives has proved to be essential.

Despite general consensus and clinical evidences supporting ERAS, their full implementation is difficult because peri-operative management is still strongly linked to conventional practices with various groups of professionals.

OBJECTIVES

The goal of the EUEMEN project is to bring together the expertise and experience of national clinical champions who have previously helped to deliver major change programmes in their countries and to use them to spread these ERAS protocols in Europe. This main goal will be achieved with the next specific objectives:

- Preparation of an educational project.
- Implementation in a significant number of European hospitals the evidence-based ERAS protocols in a homogeneous and standardised way.
- Collection data about hospital stay, morbidity and mortality of European Surgical patients to better know the surgical risk of an individual patient, hence to prevent perioperative complications.

PARTICIPANTS

Five partners from university hospitals in four different EU countries have created the EUEMEN project.

ROLE	ACRON	PARTNERS NAME	Country
COORDINATOR	IIS ARAGON	Fundación Instituto de Investigación Sanitaria Aragón	Spain
PARTNER1 (P1)	AUSLFE	Azienda Unità Sanitaria Locale Ferrara	Italy
PARTNER2 (P2)	CUNI	UNIVERZITA KARLOVA	Czech Rep

PARTNER3 (P3)	UMH	UNIVERSIDAD MIGUEL HERNANDEZ DE ELCHE	Spain
PARTNER4 (P4)	GPAP	GENERAL HOSPITAL OF THESSALONIKI G. PAPANIKOLAOU	Greece

The **target groups** involved include not just health professionals who are directly in charge of the care of surgical patients (surgeons, anaesthetists, and nurses), but also all professionals who, in some way or another, are related to the interdisciplinary treatment of these patients, such as nutritionists, stomato-therapists, physiotherapists, rehabilitators, digestologists, radiotherapists, oncologists and pathologists. As effectiveness (reduction of hospital stays and optimisation of the use of other resources) is one of the advantages of these programmes, health centres administrator, clinical managers and quality coordinators will also benefit from the project. Finally, due to the characteristics of ERAS, primary care physicians and patients play a very active role too.

Stakeholders:

- ➔ Local, regional and national authorities
- ➔ Diseases associations

ACTIVITIES & METHODOLOGY

1. Preparation of an **ERAS manual with the protocols of six different modules** (bariatric surgery, oesophageal surgery, gastric surgery, colon surgery, urgent abdominal surgery and hepatobiliary surgery) to be followed by all the target group.
2. **“Learning teaching training”** –to teach the future teachers the different protocols to be able to teach them in the different hospitals.
3. Development of the **EUPEMEN online platform**: to host an e-learning training course and a collaborative area to improve and to participate in the ERAS protocols.
4. **Dissemination** of the results in five multiplier events.
5. Four transnational meetings.

RESULTS & IMPACTS

- Development of ERAS Protocols Training Programme for health professionals.
- Training to multidisciplinary professionals (200): all the direct target groups involved in perioperative procedure.
- Implementation of the Enhanced Recovery Programmes in, at least, five hospitals in Europe.
- Creation of a professional network with the capacity to train stakeholders in hospitals, and to audit the trainers in order to guarantee the correct implementation of the programme.

Long-term effect:

- Decrease the secondary effects after surgery for patients, consequently, with a faster patient recovery.
- Reduce morbidity and mortality caused after surgeries.
- Reduce the length of stay (LOS) in the hospital and, consequently, save money for the public health system and to have more free beds for other new requested patients.