In the context of gynecology, how do we define anemia in the perioperative setting?

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Hb levels below which patients are considered anemic

<120 g/L

SOGC

WHO

RANZCOG

<130 g/L

International Consensus on Peri-Operative Management of Anemia and Iron Deficiency

Anemia is extremely common in the gynecology population and even more so perioperatively. Approximately 1 in 4 women undergoing elective major gynecology surgery have anemia.

Perioperative anemia is associated with an increased likelihood of morbidity and mortality at 30 days post-operation.

Anemia is associated with longer duration of hospitalizations and a higher rate of readmissions.

In the context of gynecology, what are the morbidities associated with anemic patients in perioperative care?

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Preoperative anaemia is considered an important independent risk factor for increased post-operative morbidity and mortality.

- Patients who are anemic pre-operatively have prolonged length of hospital stay and post-operative complications.
- Preoperative anaemia is a major independent predictive factor for the need of perioperative allogeneic blood transfusion.

A woman is 4 times more likely to receive a blood transfusion during a hysterectomy or myomectomy if her Hb is 100g/L compared to 130g/L.

In women who have a blood transfusion, approximately 1 in 8 will develop antibodies that can later affect the fetus when the woman is pregnant.

Postoperative anaemia is an issue when it comes to wound healing, and this can have a profound effect on patients’ QoL.

All these implications highlight the need for improved patient blood management in anaemic patients during the preoperative and perioperative period.
How do we manage and treat anemic patients during the preoperative period in the context of gynecology?

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Treatment of iron deficiency anaemia should be attempted when the patient is on the waiting list for surgery.

1. **Laboratory work-up (CBC and iron studies)**
2. **Preoperative Hb <130 g/L?**
   - **Yes**
     - Non-elective surgery
     - Elective surgery
       - Classify anemia and start treatment
       - Classify anemia and start treatment
         - Proceed to surgery
         - Postpone surgery until patient is no longer anemic