## Do we need a concept of intraoperative complication?

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Cunningham and Kavic [1] rightly suggest that standard accounts of surgical complications – ours included – have focused on postoperative events. [2, 3] As they point out, this leaves open the question of how we should categorise adverse intraoperative events. They argue that we should distinguish between two types of adverse intraoperative events: those which introduce additional risk of postoperative complications, and those which do not. On their account, adverse intraoperative events which introduce additional risk of postoperative events which introduce additional risk of postoperative complications, whilst those that do not are simple errors.

Cunningham and Kavic say little about why we might want to make this distinction. We take it that the underlying purpose is to focus attention on the importance of diligence in surgical performance. Diligence is defined by Gawande as "the necessity of giving sufficient attention to detail to avoid error and prevail against obstacles." [4, p. 8] It is clear that diligence in surgery requires us to attend not just to those adverse intraoperative events which lead to adverse postoperative complications, but also to adverse intraoperative events which increase the risk of postoperative complications, but by chance do not eventuate in postoperative complications in a given case.

We wholeheartedly agree about the importance of diligence for surgical performance. However, we are unconvinced that this should lead us to introduce a category of intraoperative complications. Where an intraoperative mistake does eventuate in an adverse postoperative event, this would already count as a surgical complication on our view. So the only cases where the concept of an intraoperative complication would add anything would be where an intraoperative mistake increases the risk of an adverse postoperative event, but through luck this adverse postoperative event does not occur. Given that the concept of a surgical complication has always in the past been tied to the actual occurrence of adverse postoperative events, and not simply to the increased risk of such events, we think that it would be potentially confusing to extend the concept in the way that Cunningham and Kavic suggest. We would be happy to refer to such events intraoperative mistakes,

and of course wholeheartedly agree that diligence requires us to minimise their occurrence.

1 Steven C. Cunningham, MD and Stephen M. Kavic, MD, "What Is an Intraoperative Complication?"

2 Dindo, Daniel, and Pierre-Alain Clavien. 2008. What Is a Surgical Complication? *World Journal of Surgery* 32, no. 6 (June 17): 939-941.

3 Sokol, Daniel, and James Wilson. 2008. What is a Surgical Complication? *World Journal of Surgery* 32, no. 6 (June 17): 942-944.

4. Gawande, Atul. 2007. Better: A Surgeon's Notes on Performance. Profile Books.