

POST-operative Variations in anaemia treatment and Transfusions (POSTVenTT)

ACTRN12621001517864

Status	RECRUITING
Sponsor	South Metropolitan Health Service (SMHS)
Enrollment	2,000 participants

Plain Language Summary

Anaemia — having too few red blood cells — is extremely common in patients before and after major abdominal surgery, and it can significantly slow recovery and increase the risk of complications. Despite clear international guidelines about how to manage perioperative anaemia, the way it is actually handled in hospitals varies widely. The POSTVenTT audit studies this variation by collecting real-world data from patients undergoing major abdominal surgery across hospitals in Australia and New Zealand.

This is an audit study, not a trial — meaning no experimental treatments are given. Instead, researchers track how each patient's anaemia was managed before, during, and after surgery, and compare those practices against recommended guidelines. The data will reveal which hospitals are following best practice, where gaps exist, and how different management approaches affect patient outcomes. This kind of evidence can directly drive quality improvements in surgical care.

This study is open to adult patients aged 18 or older who are undergoing major elective or emergency abdominal surgery (any approach — open, laparoscopic, or robotic) at participating hospitals. Minor procedures like appendicectomies, endoscopies, and purely palliative operations are excluded.

Key Eligibility Criteria

Inclusion (4)

- Consecutive adult patients undergoing major emergency or elective abdominal surgery will be eligible for inclusion.
- Age: Adult patients, 18 years or above
- Procedure: Major abdominal surgery, defined as an operation with an incision into the abdominal cavity and anticipated duration of more than one hour. Procedures performed using any surgical approach, including open, laparoscopic, and robotic surgery are included.
- Urgency: Patients undergoing planned (elective or expedited) or unplanned (emergency) surgery.

Exclusion (6)

- Procedures: Abdominal surgery classified as minor operations such as; laparoscopic appendectomy (emergency or elective), endoscopic procedures, transanal or transurethral procedures. A complete list can be found in the appendix 1.
- Indication: Palliative procedures as determined pre-operatively and explicitly stated in the medical record or consent form.
- Extent of surgery: Operations that are either:
- Staged with a planned return for reoperation (such as but not limited to damage control laparotomy or burns surgery)
- Change in operative plan such that during the first procedure it is determined that a reoperation is necessary, even if the patient was enrolled pre-operatively

... and 1 more (see full listing online)

Locations (47 total)

Westmead Hospital - Westmead, ACT,NSW,QLD,SA,TAS,WA,VIC, Australia
Gosford Hospital - Gosford, ACT,NSW,QLD,SA,TAS,WA,VIC, Australia
<https://www.anzctr.org.au/Trial/Registration/TrialReview.aspx?ACTRN=ACTRN12621001517864>
Concord Repatriation Hospital - Concord, ACT,NSW,QLD,SA,TAS,WA,VIC, Australia

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... and 44 more locations

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