

## **Lessons learned from over a decade of voluntary participation in MBSAQIP from a Canadian Bariatric Surgery Centre**

**Tanner Hall<sup>1</sup>, Katie Warwick<sup>1</sup>, Victoria Denbok<sup>1</sup>, Alex Boasie<sup>1</sup>, Andras Fecso<sup>1</sup>, Allan Okrainec<sup>1</sup>, Timothy Jackson<sup>1</sup>;**

*<sup>1</sup>University Health Network, Bariatric Surgery Program, Toronto, ON, Canada*

### **BACKGROUND**

The Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) was officially created in 2015. We were the first Canadian centre to be accredited by MBSAQIP and have participated in the program in its early form since 2012.

### **OBJECTIVES**

As a Canadian center voluntarily participating in MBSAQIP, we wanted to evaluate its impact on our surgical outcomes and quality improvement activity.

### **METHODS**

We reviewed the MBSAQIP semi-annual reports (SAR) from 2014-2023 for LRYGB and LSG at a single Canadian MBS centre. These reports show our risk-adjusted performance compared to all other hospitals accredited by MBSAQIP for morbidity, mortality, serious events, bleeding, leak, SSI, reoperation/intervention, and readmission.

### **RESULTS**

From 2014-2023 we have performed and entered 5,047 MBS procedures (3,687 LRYGB, 1,104 LSG, 265 other) into the MBSAQIP database. Review of SAR's demonstrate we performed "as expected" or "better than expected" in the areas of serious events, leak, bleeding, reoperation, and readmission. We did not see significant improvements in overall mortality or morbidity. The reports did identify periods where we performed "worse than expected" in overall morbidity including surgical site infection (SSI).

### **CONCLUSIONS**

MBSAQIP has allowed our program to benefit from international benchmarking. It has enabled targeted quality improvement in several areas including SSI resulting in measurable improvements in care. While we have benefited from the current reports, we have not seen any benchmarking for outcomes beyond 30-days. We anticipate the program will continue to evolve to better inform MBS centres on both procedure specific and patient specific outcomes.