

Nighttime surgery with acute sleep deprivation – Circadian Disruption is a risk factor of free flap failure

<u>Chao-Wu Yen MD</u>, Chun-Chia Chen MD, Kuo-Feng Huang MD, Haw-Yen Chiu MD, PhD, Tzong-Bor Sun MD, PhD*

Division of Plastic Surgery, Department of Surgery, Chi Mei Medical Center, Tainan, Taiwan





Risk factors include host and surgical perspectives.

If exhaustion of surgeons during nighttime surgery is a risk factor?



- All head and neck free tissue transfer between January 2005 and November 2015 in our institution
- Exclusion criteria: Missing data, reconstruction region beyond head and neck
- End points: Vascular complication needed salvage or subsequent flap failure

Interesting parameter: Surgical completion time

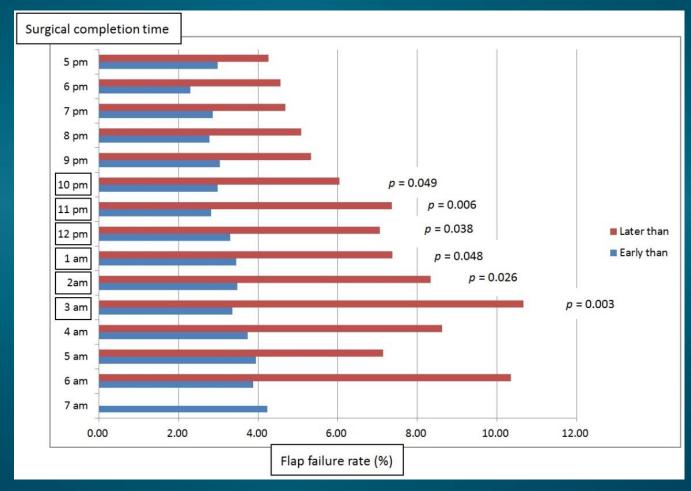
Results

701 free flaps

Early vascular complication rate: 7.1%
Flap failure rate: 4.1% following vascular salvage procedures

前美醫療 青美醫院 財國法人 青美醫院 Chi Mei Medical Center

Results



Flap failure rate increases steadily since midnight.

Results		CREES RA
Flap failure	Adjusted Odds Ratio	p-value
Surgical completion time after 10 PM	2.3	0.034
Previous neck dissection	3.3	0.025
Tumor stage Benign	2.7	0.158
Stage III, IV	1.0	0.937
Recurrence	1.1	0.831

6

意業器度 寿子醫院 MBE法人 寿子醫院 Chi Mei Medical Center



 Previous neck dissection deteriorates the free flap outcome.

And

Microsurgeons working in the late nighttime (10 pm) yield a poorer outcomes.
Sleep deprivation or circadian desynchronization

of surgeons may play a major role.