

In a study of Senders et al. from [Boston](#) and [Utrecht](#), patients were extracted from the [National Surgical Quality Improvement Program](#) registry (2005-2015) and analyzed using [multivariable logistic regression](#).

A total of 7376 [patients](#) were identified, of which 948 (12.9%) experienced a major [complication](#). The most common major complications were [reoperation](#) (5.1%), [venous thromboembolism](#) (3.5%), and [death](#) (2.6%). Furthermore, 15.6% stayed longer than 10 d, and 11.5% were readmitted within 30 d after surgery. The most common reasons for reoperation and [readmission](#) were [intracranial hemorrhage](#) (18.5%) and [wound](#)-related complications (11.9%), respectively. Multivariable analysis identified older [age](#), higher [body mass index](#), higher American Society of Anesthesiologists ([ASA](#)) classification, dependent [functional](#) status, elevated preoperative [white blood cell](#) count (white blood cell count [WBC](#), >12 000 cells/mm<sup>3</sup>), and longer operative time as predictors of major complication (all  $P < .001$ ). Higher ASA classification, dependent [functional](#) status, elevated [WBC](#), and [ventilator](#) dependence were predictors of extended length of stay (all  $P < .001$ ). Higher ASA classification and elevated WBC were predictors of reoperation (both  $P < .001$ ). Higher ASA classification and dependent functional status were predictors of readmission (both  $P < .001$ ). Older age, higher ASA classification, and dependent functional status were predictors of death (all  $P < .001$ ).

This study provides a descriptive analysis and identifies predictors for short-term complications, including death, after craniotomy for primary malignant brain tumors <sup>1)</sup>.

<sup>1)</sup>

Senders JT, Muskens IS, Cote DJ, Goldhaber NH, Dawood HY, Gormley WB, Broekman MLD, Smith TR. Thirty-Day Outcomes After Craniotomy for Primary Malignant Brain Tumors: A National Surgical Quality Improvement Program Analysis. *Neurosurgery*. 2018 Dec 1;83(6):1249-1259. doi: 10.1093/neuros/nyy001. PubMed PMID: 29481613.

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