Endocrine surgery in present-day academia

Jennifer H. Kuo, MD, Janice L. Pasieka, MD, Kevin M. Parrack, MD, John A. Chabot, MD, and James A. Lee, MD, New York, NY, and Calgary, Alberta, Canada

Background. Endocrine surgery is a specialty that is evolving constantly. In this study, we sought to delineate the practice patterns of surgeons taking care of endocrine diseases in present-day academic centers.

Methods. A review of the Faculty Practice Solutions Center database was conducted for the years 2005, 2009, and 2013. Practice patterns were determined by International Classification of Diseases, 9th Revision and Current Procedural Terminology codes, and analyzed for practice composition, regional variability, and volume of endocrine operations.

Results. Of 97 national academic centers, 52 were identified to have 120 practicing American Association of Endocrine Surgeons (AAES) surgeons in the study. On average, endocrine operations comprise ~65% of the AAES surgeon's practice, and 51% are considered high-volume surgeons for thyroidectomy, parathyroidectomy, and adrenalectomy. Most non-AAES surgeons who perform endocrine operations are otolaryngologists (24.5%) and other general surgeons (18.5%). Overall, non-AAES surgeons perform the majority of endocrine operations at academic institutions (61.6%), and low-volume surgeons perform most of these operations (55.6%).

Conclusion. Research has shown that high-volume surgeons have improved outcomes. Even in academia, however, the majority of endocrine operations are performed by low-volume surgeons, suggesting that there is an opportunity for expanding the number of surgeons with expertise in endocrine surgery in present-day academic centers. (Surgery 2014;156:1461-70.)

From the Section of Endocrine Surgery, Department of Surgery, ^a Columbia University, New York, NY; and Department of Surgery, ^b University of Calgary, Calgary, Alberta, Canada

THE INCIDENCE AND PREVALENCE OF ENDOCRINE DISORDERS is increasing, with thyroid nodules noted in 30% of adults, 1-3 the rate of thyroid cancers increasing by 6.6% annually in the United States, 4 and 100,000 new cases of primary hyperparathyroidism diagnosed each year.⁵ This increasing frequency requires a greater need for experienced surgeons to manage optimally these diseases and is further underscored by increasing evidence that patient outcomes improve with surgeon experience. Endocrine surgery has become a recognized surgical specialty capable of addressing this increasing demand. The American Association of Endocrine Surgeons (AAES), dedicated to the advancement of the science and art of endocrine surgery, has continued to grow rapidly since it was first established in 1981 and consists currently of more

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Reprint requests: Jennifer H. Kuo, MD, Division of Endocrine Surgery, 161 Fort Washington Ave, 8th Floor, New York, NY 10040. E-mail: jhk2029@cumc.columbia.edu.

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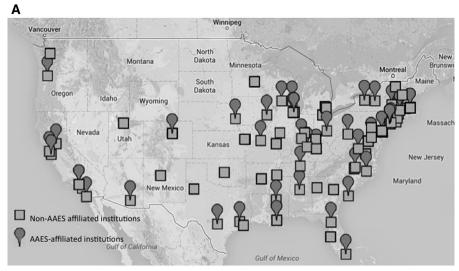
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than 500 members. As the specialty of endocrine surgery has continued to evolve during the past few decades, the pattern and scope of an endocrine surgeon's practice remains relatively unknown. Furthermore, it remains unclear which surgeons are performing endocrine operations. In this study, we sought to delineate the practice patterns of surgeons taking care of endocrine diseases in present-day academic centers.

METHODS

The information contained in this article was based on the University Health System Consortium-AAMC Faculty Practice Solutions Center (FPSC) database maintained by the University Health System Consortium, and the Association of American Medical Colleges (AAMC). The FPSC database is composed of physician faculty practice plans that are affiliated with an academic medical school. Each institution may encompass several hospitals. Of the 141 US academic medical centers identified by the AAMC, 97 (68.8%) participate in the FPSC. Among other data, the database provides information on physician clinical activity and coding. A retrospective review of the FPSC



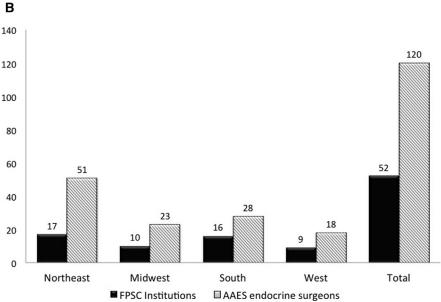


Fig 1. (*A*) Faculty Practice Solutions Center Institutions and AAES-affiliated surgeons. A total of 97 academic insitutions participated in the Faculty Practice Solutions Center Database in 2013. Of these, 52 (53.6%) institutions have surgeons affiliated with the American Association of Endocrine Surgeons (AAES). (*B*) Distribution of AAES-affiliated FPSC institutions and AAES surgeons by region. Seventeen FPSC institutions with at least one practicing AAES surgeon were located in the Northeast, 10 in the Midwest, 16 in the South, and 9 in the West. A total of 120 AAES-affiliated surgeons were identified, 51 the Northeast, 23 in the Midwest, 28 in the South, and 18 in the West. 100 of these surgeons were identified to have performed at least one thyroid, parathyroid, or adrenal operation in 2013.

database was conducted from years 2005, 2009, and 2013. Practice patterns were determined by *International Classification of Diseases, 9th edition* (ICD-9) and *Current Procedural Terminology* (CPT) codes. The frequency of endocrine disorders, including benign thyroid disorders (ICD-9 226, 240, 241, 242, 244, 246), malignant thyroid neoplasms (ICD-9 193), disorders of the parathyroid glands (ICD-9 252 and 275.42, 588.81 resulting in parathyroidectomy), and disorders of the adrenal

gland (ICD-9 255 and 227, 237.2, 239.7 resulting in adrenalectomy) were analyzed. Disorders of the breast (ICD-9 174, 217, 233, 610, 611) also were included. The frequency of endocrine procedures including fine needle aspiration biopsies (CPT 60100, 10022, 76942), diagnostic ultrasonography (CPT 76536), thyroid procedures (CPT 60200-71), parathyroid procedures (CPT 60500-05), adrenal procedures (CPT 60540-45, 60659), and general surgery operations including breast

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