PRESS RELEASE
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STATE RANKS CALIFORNIA HOSPITALS AND SURGEONS ON HEART BYPASS SURGERY PERFORMANCE
MORTALITY RATES CONTINUE TO DECLINE

SACRAMENTO – The Office of Statewide Health Planning and Development (OSHPD) today released the “California Report on Coronary Artery Bypass Graft (CABG) Surgery, 2007-2008 Hospital & Surgeon Data,” showing a continuing decline in operative mortality at the 122 state licensed California hospitals where 279 surgeons performed almost 14,000 uncomplicated or “isolated” heart bypass surgeries.

“These reports are intended to help patients make decisions about where to receive the best treatment, while providing hospitals and surgeons data they can use in assessing the quality of care provided to their heart bypass patients,” said OSHPD Healthcare Outcomes Center Manager Joseph Parker. “We have collected these data since 1996 and our current report shows that hospitals and surgeons are improving cardiac care, while steadily lowering mortality rates.”

This report presents risk-adjusted operative mortality rates to help evaluate hospital and surgeon performance, and risk-adjusted post operative stroke results to help evaluate hospital performance. Risk-adjustment is a statistical technique that allows for fair comparison of hospital outcomes even though some hospitals have sicker patients than average. Operative mortality includes all deaths that occur during the hospitalization in which the CABG surgery was performed (regardless of length of stay) and any deaths within 30 days after the surgery, no matter where they occur. Post-operative stroke is defined as a central neurologic deficit persisting more than 72 hours (2007 data), or that did not resolve within 24 hours (2008 data) after surgery.

Heart bypass surgery is one of the top ten surgeries in California in terms of cost, number of cases, mortality, and hospital revenue generated. Heart disease is the leading cause of death among both men and women in the United States.

2008 Mortality Findings by Hospital:

- CABG surgery mortality among higher volume hospitals was significantly lower when hospitals performed more than 300 surgeries annually compared to hospitals that performed less than 200 surgeries per year.
• There were 313 operative deaths among 13,957 isolated CABG surgeries. Patients undergoing cardiopulmonary resuscitation on the way to the operating room (salvage cases) were excluded from the report results.

• There has been a 24% reduction in the operative mortality rates since 2003, the first year of mandated reporting.

• The operative mortality rate for isolated CABG surgery in California was 2.24%, compared to 2.4% for 2007. Isolated CABG surgery means that no other major procedure was as valve repair was performed at the same time.

• Hospital mortality rates varied significantly from 0% to 11.2%, but after adjusting for patients’ pre-operative health, 118 of 120 hospitals (98%) performed at a rate that did not differ significantly from the statewide average.

2007-2008 Mortality Findings by Surgeon:

• Despite significant variations, from 0% to 100%, in surgeon operative mortality rates after adjusting for patients’ pre-operative health, 269 of 279 (96%) of surgeons performed at a rate that did not differ significantly from the statewide average.

• Two surgeons performed statistically significantly “Better” than the state average in terms of risk-adjusted mortality, while eight surgeons performed “Worse” than the state average.

• The operative mortality rate for isolated CABG surgery in California for 2007-2008 combined was 2.3%, compared to 2.4% for 2005-2006. The rate for 2003-2004 was 3.1%.

2007-2008 Stroke Findings by Hospital:

• Despite wide variations, from 0% to 6.1%, in post-operative stroke rates among hospitals after adjusting for patients’ pre-operative conditions, 115 of 122 (94%) of hospitals performed at a rate that did not differ significantly from the statewide average.

• For the second report in a row, Alta Bates Summit Medical Center in the San Francisco Bay Area was the only California hospital that performed “Better” than the statewide average on post-operative stroke.

• Of the 28,711 patients who underwent isolated CABG Surgery, 411 (1.43%) experienced a post-operative stroke, similar to the national rate of 1.4% as reported by the Society of Thoracic Surgeons.

As one of thirteen departments within California’s Health and Human Services Agency, the Office of Statewide Health Planning and Development (OSHPD) is committed to
“Equitable Healthcare Accessibility for California.” OSHPD analyzes and supports the state’s healthcare infrastructure, promoting medical care transparency for Californians. OSHPD also supports a diverse and culturally competent workforce, ensures safety of buildings used to provide healthcare, insures loans to develop healthcare facilities, and facilitates development of a sustained capacity for communities to address their healthcare concerns.

*The California Report on Coronary Artery Bypass Graft Surgery, 2007-2008 Hospital and Surgeon Data* is available online at [www.oshpd.ca.gov](http://www.oshpd.ca.gov)