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Certificate of participation:

**Survey of perioperative use of ace inhibitors in a large teaching hospital**

Sept - December 2019

**The Project: ACE inhibitors have traditionally been omitted prior to elective surgery due to concerns about intra-operative hypotension. However, increasingly it is recognised that this approach can lead to peri-operative hypertension, delays in re-institution post-procedure and increased surgical cancellation rates. We surveyed a department comprising 134 consultant anaesthetists at a large teaching hospital about their practice regarding perioperative ACE inhibition and their support for guideline changes.**

**The Results: We achieved a response rate of 75.2%. 94.0% supported changing the guidelines to continue ACE inhibitors if prescribed for heart failure, 81.9% if it were the sole anti-hypertensive and 74.5% if it were one of multiple agents. These results led directly to a change in the hospital peri-operative guidelines. This has enhanced patient care, reducing local variation in practice and will likely lead to fewer on-the-day cancellations and better post-operative recovery.**



# The project team: