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Summary

THE EFFECT OF DIABETES MELLITUS ON OUTCOMES FOLLOWING RESECTIONAL COLORECTAL SURGERY

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Colorectal

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A national cohort study of 106,139 patients in England found diabetes mellitus associated with increased 90-day mortality, longer hospital stays, and higher readmission rates following resectional colorectal surgery.

KEY POINTS

- Patients with diabetes had 28% higher adjusted 90-day mortality risk compared to those without diabetes (HR 1.28, 95% CI 1.18-1.40, p<0.001), with insulin-treated patients showing the highest risk (HR 1.49).
- Diabetes was associated with 10% longer hospital length of stay (adjusted TR 1.10, 95% CI 1.08-1.11, p<0.001) and 22% higher 90-day readmission risk (HR 1.22, 95% CI 1.16-1.28, p<0.001).
- The study included 10,931 patients with diabetes (10% prevalence), of whom 94% had Type 2 and 20% were insulin-treated, with results adjusted for age, sex, deprivation, comorbidities, urgency, indication, and surgical approach.
- Authors suggest these findings should inform perioperative optimisation, consent discussions, and patient selection for colorectal resection.

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