Background

- Pelvic floor disorders such as stress urinary incontinence (SUI) and pelvic organ prolapse (POP), are common disorders with prevalence increasing with parity and age. 
- The APFPR is a national clinician led Clinical Quality Registry (CQR) that was established following the recommendations of the 2018 Senate Committee Inquiry into transvaginal pelvic mesh complications in women.
- The APFPR monitors the safety and effectiveness of pelvic floor procedures (PPF) involving mesh/other prostheses by ongoing systematic collection, analysis and reporting of outcomes.

Objectives of the APFPR

- To provide feedback to clinicians, hospitals and the public on the safety & effectiveness of pelvic floor interventions
- To monitor safety and quality of care in both SUI and POP pelvic floor procedures, with a focus on those involving mesh, including revision and mesh explantation
- To address the deficits in the systematic collection, analysis and reporting of pelvic floor procedures, and to establish early warning systems
- Designed with consumer involvement; the APFPR will provide meaningful prospective longitudinal health outcome information for women undergoing pelvic floor procedures

Aim

To describe the aim, development and implementation of the APFPR

Methods

Governed by a Steering Committee with representation by consumers, clinicians and government departments; managed by Monash University

- Targeting high volume sites performing SUI and POP procedures or via expression of interest
- Eligible patients recruited by surgeon/site using an opt-out approach or single waiver of consent
- Collects pre-operative, operative, post-operative clinical data for women undergoing SUI and POP procedures:
  - Mid-urethral slings
  - Bulking agents
  - POP mesh procedures
  - Revisions and explantations

Data reporting: providing customised reports to:
- Hospitals
- Clinicians
- Public

Results

As of 14/9/2023,

- Public-Private split of recruited patients
- Average age = 62 years (SD= 13.5)

- 36 hospitals with ethics and governance approvals of which 30 are contributing data
- 452 SUI and POP procedures have been recorded
- 380 primary surgeries and 72 surgeries to manage complications

The APFPR has been developed to align with and support health service implementation of the ACHQ’s credentialing guidelines

Designed with consumer involvement; the APFPR will provide meaningful prospective longitudinal health outcome information for women undergoing pelvic floor procedures

Patient Reported Outcome Measures (PROMs)

The Australian Pelvic Floor Questionnaire is the tool being used for PROMs. Initial implementation has shown good response rates (approx 70%) using multimodal administration with mail, email, sms and telephone.

Clinical Quality Indicators

- Objective clinical assessment
- Procedure assessment

Outcome Indicators

- Efficacy
- Return to theatre
- Readmission
- Catheterisation

Conclusion

From 2023, the APFPR will produce benchmarking reports incorporating CQIs, PROMs and clinical outcomes to provide feedback to hospitals and surgeons thereby highlighting the potential of CQRs to monitor device safety and clinical practice to support quality improvement.

References