



ON THE COVER:

Frailty is a risk factor for adverse postoperative outcomes. Hospitals that perform higher volumes of surgery have better outcomes than low-volume providers. In this issue of ANESTHESIOLOGY, McIsaac *et al.* found that frail patients have reduced survival and increased failure to rescue when they undergo operations at hospitals having a lower volume of frail surgical patients. In an accompanying Editorial View, Wang and Wunsch discuss this study as a first step toward elucidating the best care options for frail patients who require surgery.

- McIsaac *et al.*: Association of the Hospital Volume of Frail Surgical Patients Cared for with Outcomes after Elective, Major Noncardiac Surgery: A Retrospective Population-based Cohort Study, p. 602
- Wang and Wunsch: Hospital Experience Caring for the Frail: A New Concern for Surgical Patients, p. 575

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CLINICAL SCIENCE

- ◆◆🌐 **Association of the Hospital Volume of Frail Surgical Patients Cared for with Outcomes after Elective, Major Noncardiac Surgery: A Retrospective Population-based Cohort Study** 602
D. I. McIsaac, D. N. Wijeyesundera, A. Huang, G. L. Bryson, and C. van Walraven

In a retrospective analysis of 63,381 frail patients, the authors evaluated the associations between hospital surgical volume of frail patients and 30-day survival. Adjusted survival was significantly improved in the highest volume quintile compared to the lowest: hazard ratio 0.51 (95% CI, 0.35 to 0.74). Survival among frail patients was best in centers that care for large numbers of frail surgical patients. *SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT*

- ◆🌐 **Adding Examples to the ASA-Physical Status Classification Improves Correct Assignment to Patients** 614
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This prospective cohort study of 100 patients undergoing electroconvulsive therapy (ECT) demonstrated that (1) most patients did not develop a high-sensitivity cardiac troponin I (hscTnI) elevation after ECT; (2) median hscTnI values did not change after ECT, both when measured immediately and 2 h after ECT; and (3) a small subset of patients developed new hscTnI elevation after ECT, indicative of myocardial injury.

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