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ACHQC CELEBRATES TWO MAJOR MILESTONES: 100,000 CASES AND 100 PEER-REVIEWED PUBLICATIONS

National registry delivers patient-focused, data-driven resources to enhance abdominal core health

In less than 10 years since inception, the Abdominal Core Health Quality Collaborative (ACHQC) has grown into the nation’s largest repository of real-world data on hernia surgical outcomes. This summer, the ACHQC celebrated two significant milestones – the 100,000th case entered and the 100th peer-reviewed publication utilizing the wealth of high quality data collected in the ACHQC Registry.

“Through the support and dedication of patients, surgeons, clinical care teams and ACHQC Foundation partners, the Collaborative has continued to thrive, even during the challenging past two years,” shared Michael Rosen, MD, ACHQC President and Medical Director. “Reaching these notable accomplishments is a testament to the tremendous impact of collective focus and commitment to the pursuit of enhanced patient care.”
Founded in 2013, the Abdominal Core Health Quality Collaborative (ACHQC) is a non-profit collaborative focused on maximizing quality and value of care delivered to patients with hernias and other abdominal core diseases. The ACHQC has developed and manages a robust real world data registry which securely houses millions of critical data points including demographic and operative details and long term outcomes related to hernia and abdominal core surgeries.

“The ACHQC Registry is regarded globally as a trusted source of comprehensive, clinically relevant data,” commented Benjamin Poulose, MD, MPH, ACHQC Director of Quality and Outcomes. “We encourage rigorous assessment and appreciate impartial peer-review of ACHQC data analyses by experts in our field,” Dr. Poulose continued. “With a bibliography of over 100 peer-reviewed publications to date, our ability to leverage the breadth of ACHQC data and disseminate it broadly is extraordinary.”

VIEW THE FULL PRESS RELEASE

RECAP: ACHQC AT AHS

The ACHQC continues to partner closely with the American Hernia Society (AHS) for the benefit of patients, surgeons, hospitals, and industry partners. This past September, the yearly ACHQC session at the 2022 AHS Annual Meeting focused on registry-embedded randomized controlled trials. The session in Charlotte was well attended and summarized the groundbreaking efforts of the ACHQC to answer key clinical questions using the highest level of evidence.

Dr. Wes Love (Prisma Health, Greenville, SC) kicked off the session with results from the long anticipated Open versus Robotic Retromuscular Hernia Repair (ORREO) trial. In this study, 91 (45 open, 46 robotic) patients were randomized to undergo either open or robotic-assisted retromuscular hernia repair. No difference was observed in the primary composite outcome of short term wound morbidity, complications, and length of stay. A 1-day reduction in length of stay was observed for the robotic-assisted approach. Dr. Clayton Petro (Cleveland Clinic, Cleveland, OH) presented results of a randomized controlled trial comparing robotic IPOM versus robotic ETEP for ventral hernia. In this multi-center trial involving 100 patients, patients undergoing either approach had similar rates of postoperative pain, narcotic usage, and length of stay. Dr. Love presented a second randomized controlled trial of 250 (125 in each group) patients, the Reducing Infection at Surgical Site with Antibiotic Irrigation During Ventral Hernia Repair (RINSE) trial, led by the Prisma group which found that antibiotic irrigation of mesh prior to implantation did not result in a reduction in short term wound complications. Finally, Dr. Ajita Prabhu (Cleveland Clinic, Cleveland, OH), showed long-term results of a randomized controlled trial comparing fixation to no fixation for open retromuscular repair. After analyzing results in 325 patients, their group found that no fixation was not inferior to fixation with respect to recurrence 1 year after repair.

These registry embedded randomized trials make performing these studies much more efficient and easier to implement. As more trials are performed, the ACHQC is leading the way in ensuring surgeons and patients have high quality data to make clinical decisions.

Follow @ACHQC on Twitter!
We invite you to join us for the 5th Annual ACHQC Quality Improvement Summit! The meeting is a true collaborative learning experience where we analyze data, identify high performers and share critical quality improvement in patient data to maximize your outcomes. It will be highly interactive and critical to our mission of quality improvement. We are excited to announce that the QI Summit will once again be in Denver, Colorado!

**When:**
Saturday & Sunday,
March 4-5, 2023
Registration deadline is February 10, 2023

**Where:**
Westin Denver International Airport
8300 Peña Boulevard, Denver, CO 80249
Book your stay by February 3, 2023

**Registration:**
The Annual ACHQC QI Summit is open to all active ACHQC participants. Registration for participants is free, however space is limited. After you complete the registration form, your membership will be verified and you will be sent an email confirming your registration. **If you register for the meeting and are unable to attend, please let the ACHQC know as soon as possible.**

"I just wanted to congratulate you for the patient guide and app, this is really amazing to have these information available! I recently had abdominal surgery in France where I live, and I have no recommendation, information or else to rely on... Hopefully your team will increase internationally! Keep up the good work."
2023 ACHQC RESIDENT & FELLOW RESEARCH GRANT

ACHQC Leadership is excited to announce that we are once again offering our ACHQC Resident & Fellow Research Grant for 2023!

The application deadline is February 1, 2023.

Please click below for more information about the grant guidelines and how to submit your application.

VIEW GUIDELINES  SUBMIT APPLICATION

CMS LINKAGE

The ACHQC is proud to announce successful linkage of our clinical data with Centers for Medicare and Medicaid (CMS) administrative data to enhance long-term follow up. This will make tracking the outcomes of our patients easier to obtain and is part of the collaborative’s overall Focus on Follow Up plan. Obtaining long-term follow up in our current health care system is very difficult, especially for hernia patients. The Focus on Follow Up plan recognizes that multiple different ways will be needed to obtain follow up on patients long-term. This can include electronic medical record integration, patient reported outcomes, and linkage of ACHQC data to administrative datasets like CMS. Currently, we are able to link over 70% of our patients covered by Medicare to CMS data. This enhanced follow up was made possible through the ACHQC’s close partnership with MDEpiNet. MDEpiNet is a global Public-Private Partnership that brings together leadership, expertise, and resources from health care professionals, industry, patient groups, payers, academia, and government to advance a national patient-centered medical device evaluation and surveillance system.

ACHQC + AMAZONSMILE

We are excited to announce that ACHQC is now a recognized charity on AmazonSmile! You can visit https://smile.amazon.com/ch/84-4009654, scan the QR code, or click the link below to choose ACHQC as your “favorite” charitable organization. Amazon will donate 0.5% of purchases to ACHQC at no cost to you! Please consider signing up with ACHQC as your “favorite” organization and spread the word!

ACHQC + AMAZONSMILE
Dr. Anthony Iacco, Medical Director of Robotics at Beaumont Hospital, Royal Oak, MI champions the expansion of the robotic surgery program at Beaumont Health. Dr. Iacco has been active in the ACHQC since 2015 and was elected to our Board of Directors in 2022.

“When robotic surgery is appropriate for the patient and the situation, we generally see great outcomes,” reported Dr. Iacco, lead investigator of a recently published study utilizing ACHQC data. In the study, patients undergoing robotic hernia surgery experienced an average 2 day reduction in length of hospital stay. “This is a win-win both for the patient’s experience and for reducing time spent in the hospital.”

To learn more about Dr. Iacco and the robotic program at Beaumont, click the link below.

VIEW THE FULL ARTICLE

ACHQC MEMBERS IN THE NEWS

We are excited to announce that the new ACHQC “Core Insights” Lecture Series for 2022-2023 will be hosted by the ACHQC Resident/Fellow committee. This committee is composed of residents and fellows across the US and Canada who have an interest in complex hernia management. This group has developed a curriculum to focus on fundamental and advanced topics within the specialty of Abdominal Wall Reconstruction. Key landmark papers and current literature, including ACHQC-driven data for each topic will be discussed. Two to three high-quality articles have been selected for review and critical evaluation during each session. Content-experts who are faculty members of the ACHQC will moderate each session for an interactive, high-level, educational experience for all viewers. Each session will be recorded and posted on the ACHQC website for future viewing. We are excited for this opportunity to dive deeper into the advancing topics of Abdominal Wall Reconstruction with content-experts and would like to invite residents, fellows, and faculty members from programs across the country to join for these interactive sessions!

Upcoming Schedule:

**MONDAY, NOVEMBER 14TH, 2022 - 8:00PM ET**
Adjunctive Measures to Loss of Domain Hernias

RSVP HERE
VIEW SESSION MATERIALS

**MONDAY, DECEMBER 12TH, 2022 - 8:00PM ET**
MIS VHR – Part 1: Laparoscopic Approaches and Data

RSVP HERE
VIEW SESSION MATERIALS

**MONDAY, JANUARY 9TH, 2023 - 8:00PM ET**
MIS VHR – Part 2: Robotic Approaches and Data

RSVP HERE
VIEW SESSION MATERIALS

Visit the QC Core Insights homepage HERE for more information on each session.