

The Role of Language Proficiency in Accessing Equitable Diagnosis in Perioperative Settings

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Disclosures

Funding/Awards

- NIH/NCATS KL2TR001882
- NIH/NIA RCMAR Scholar
- NAM Dx Ex Scholar with support from the John A. Hartford Foundation



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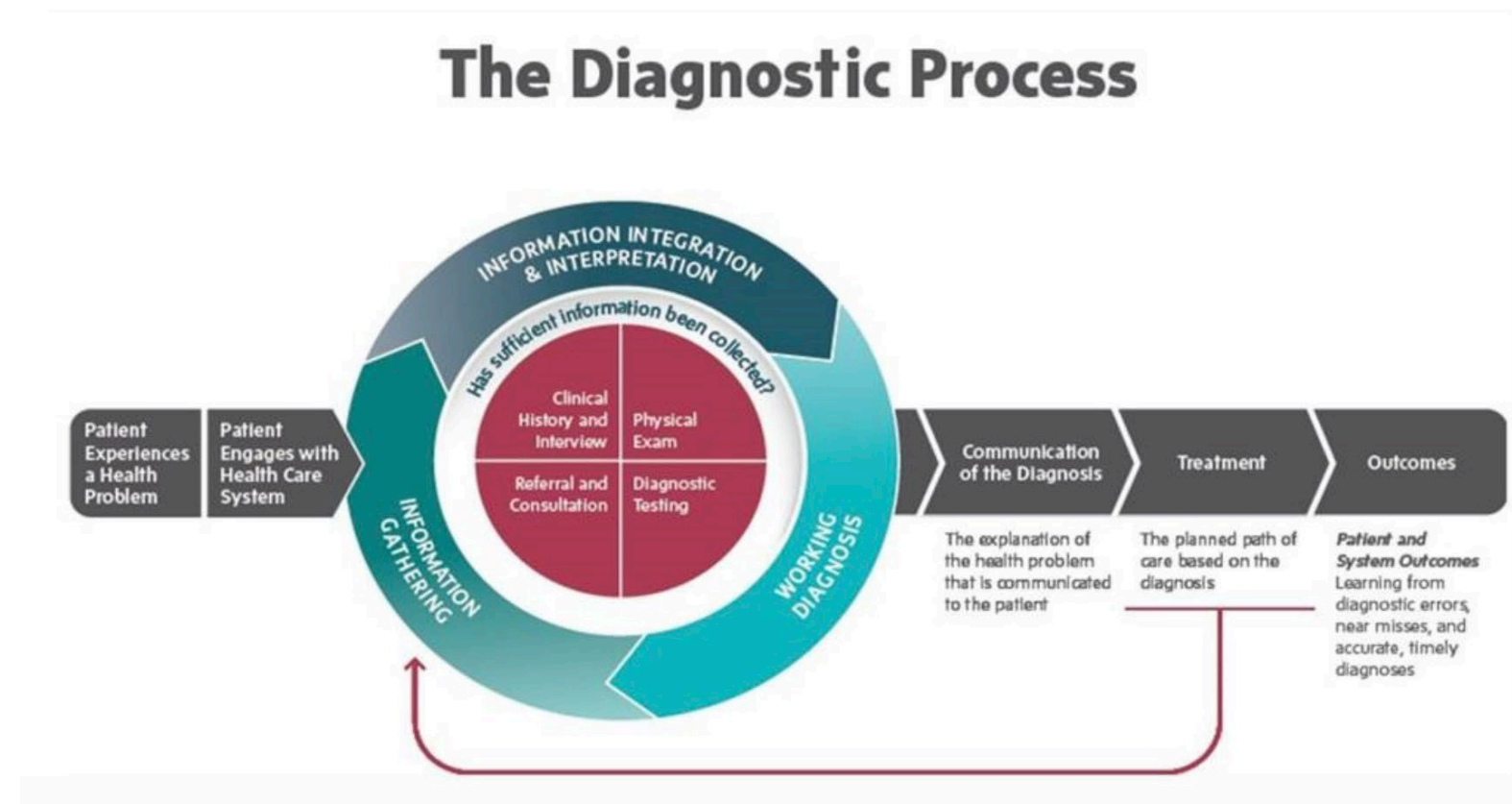


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Diagnostic Excellence

Beyond avoiding medical errors

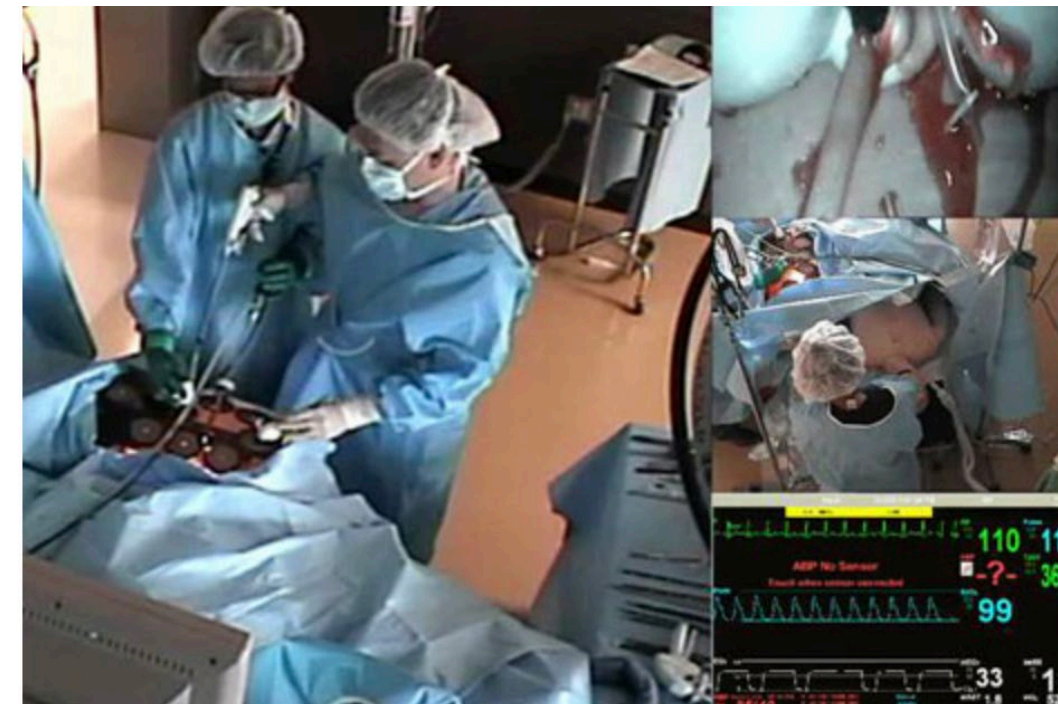
- Safe
- Effective
- Patient-Centered
- Timely
- Efficient
- Equitable



Language in Diagnostic Process During the Perioperative Period

Poor communication is a common cause of errors in healthcare

- Safe
- Effective
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Case Example

Colleague informs me:

- Cancel the case
- Glucose is off the chart
- Patient is “non-compliant” with diabetes treatment
- Using a phone interpreter patient stopped taking his medication

Framing the case



Case Example

- 67 yo ESRD, DM, well controlled with A1C of 6.2 on metformin
- Preop visit 5 weeks prior, was conducted using teenage daughter as the interpreter
- Praise for well controlled glucose was understood as you no longer have diabetes
- Preoperative instruction to hold metformin was understood as stop metformin



Frames Around Communication

It is common for patients to be labeled as “non-compliant,”
when in fact ineffective communication and lack of
comprehension of instructions result in diagnostic and
treatment failure



Language in Diagnosing Cognitive Changes After Surgery

Post-operative Delirium

Exclusion: “inability to speak, read, or understand the English language.”

Culley DJ, doi:10.1097/ALN.0000000000001859

Neuroinflammation as a Mechanism for Post-operative Delirium

“Exclusion criteria includes ...inadequate English fluency”

David-Bercholz J, doi:10.1016/j.bbih.2022.100555

Biomarkers for Post-operative Cognitive Decline

Inclusion “have English as a first language”

Price CC doi:10.1097/ALN.0000000000000080

Cognitive Trajectory following Major Surgery

Inclusion; “70years or older, English speaking, and scheduled to undergo elective surgery”

Kunicki ZJ, doi:10.1001/jamainternmed.2023.0144



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Language in Preoperative Cognitive Screening

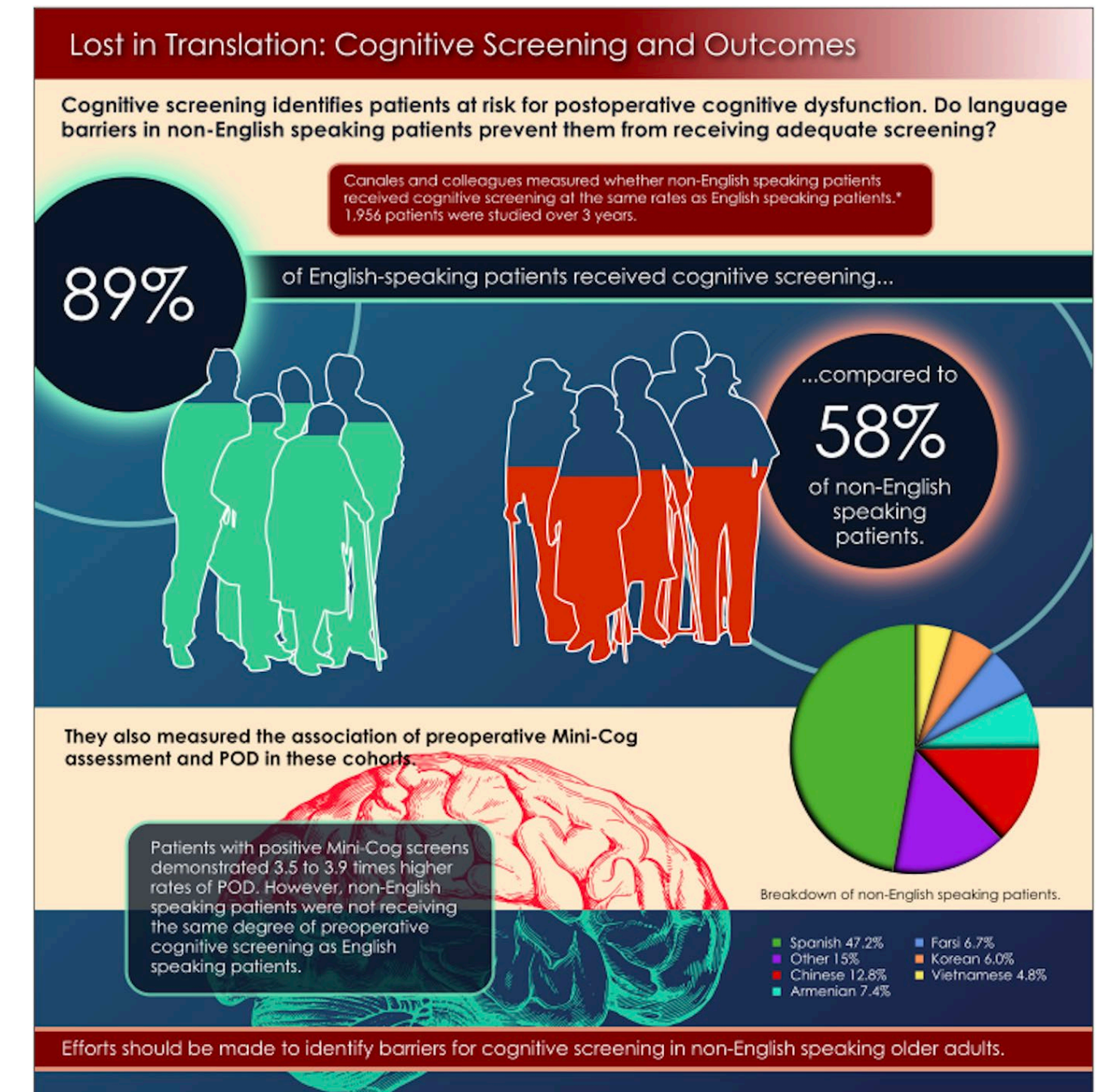
KEY FINDINGS

- **Question:** Does preoperative cognitive screening occur at the same rate in those with language preference other than English when compared with English preference?
- **Findings:** Differences exist in the rates of cognitive screening between English-speaking and language other than English-speaking patients.
- **Meaning:** By ignoring older adults who speak a language other than English during preoperative cognitive screening, health disparities may be introduced, which has implications for postoperative complications.
- **Question:** Is preoperative Mini-Cog associated with postoperative delirium in older adults who speak a language other than English?
- **Findings:** Abnormal Mini-Cog scores are associated with postoperative delirium in those who speak English and in those whose a language preference is other than English.
- **Meaning:** Preoperative Mini-Cog screening has the potential to identify those at risk of developing postoperative delirium, regardless of primary language.

Language in Preoperative Cognitive Screening

When developing programs intentional about language equity

- Safe
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Language Proficiency

Preoperative communication

- Preoperative optimization
- Intraoperative management
- Postoperative recovery



THANK YOU!

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