



ASO Author Reflections: The Right Care, for the Right Patient, at the Right Time: Development of the PREdiCT Screening Tool for Prehabilitation in Cancer Surgery

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Past

Cancer surgery carries significant perioperative risk. Optimizing a patient's health status before surgery, known as 'prehabilitation,' has emerged as a promising strategy to reduce postoperative complications and accelerate recovery. Despite growing evidence of its benefit, prehabilitation remains far from universally accessible. A recent global survey found that only 21% of hospitals provide prehabilitation as a standard of care,¹ largely because of resource constraints and narrow timeframes between diagnosis and surgery. To address this, we set out to develop an online, self-reported screening tool through a comprehensive pre-defined process.² Stage one involved a

scoping review to identify screening tools used in patients undergoing gastrointestinal cancer surgery, yielding 77 unique tools across physical (n=21), nutritional (n=16), and psychological (n=40) domains.³

Present

In stage two, we conducted an international Delphi study⁴ to achieve expert consensus on which self-reported screening tools, identified through the scoping review, were appropriate for use. We recruited 308 multidisciplinary prehabilitation experts from 49 countries via the Global (P) rehabilitation Initiative (<https://source.sydney.edu.au/global-prehabilitation-initiative/>). This resulted in 10 self-reported screening tools that met consensus as appropriate across physical, nutritional, and psychological domains. Systematic evaluation of these tools, in terms of clinical utility and implementation feasibility, led to the identification of three optimal tools for use in the Preoperative Risk Evaluation for Cancer Treatment (PREdiCT) screening tool, to be tested in an international prospective cohort study (Stage 3).

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Future

The PREdiCT study will recruit 1214 patients from 36 sites across 19 countries, with the primary aim of establishing optimal risk stratification thresholds. If validated, PREdiCT has the potential to transform how we identify and support vulnerable patients during their cancer experience. By enabling clinicians to rapidly and accurately identify people at high risk, the tool will facilitate the delivery of targeted and tailored prehabilitation, ensuring that resources are directed where they are most needed.

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