

# Is it safe to shut down the operating room for latex-allergic patients

A retrospective study evaluated 717 patients with reported or confirmed latex allergy who underwent 885 surgical procedures between 2014-2025. The objective was to confirm if the institutional protocol time of 2h30 for surgical room downtime is safe for caring for these patients.

717

## Patients Evaluated

With reported or confirmed latex allergy

885

## Procedures Performed

168 patients had multiple procedures

0

## Adverse Reactions

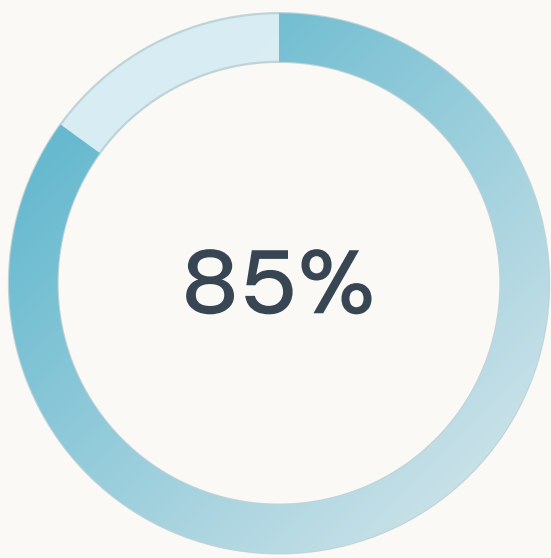
No adverse events recorded in 11 years

## Epidemiological Profile

- Average age: 18.6 years (median 13 years)
- 75% of patients were up to 20 years old
- 54.6% female, 45.4% male
- Average of 6.6 previous surgeries per patient

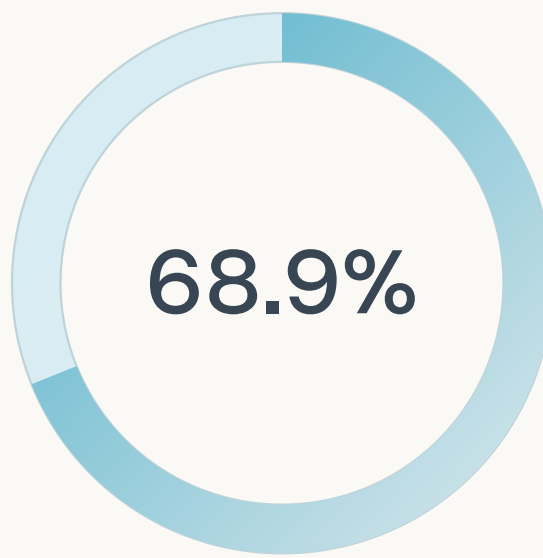
## Main Diagnoses

- 51.6% myelomeningocele
- 18.5% congenital malformations
- 16% cerebral palsy
- 33% associated neurogenic bladder



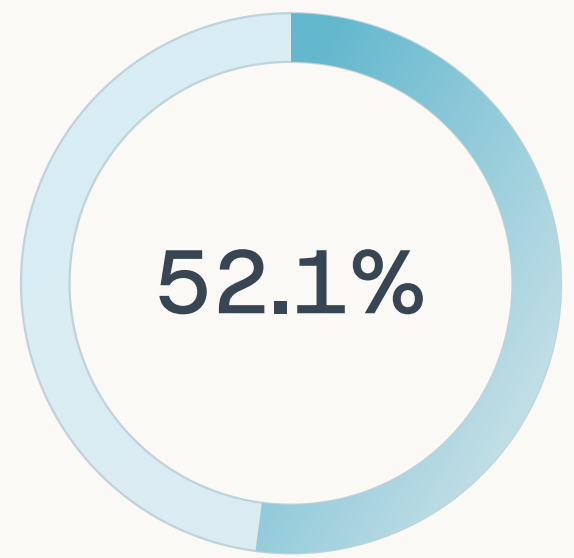
### Self-Reported Diagnoses

Only 14.5% underwent specific IgE testing for latex



### First Schedule Slot

Procedures performed in the initial period of the day

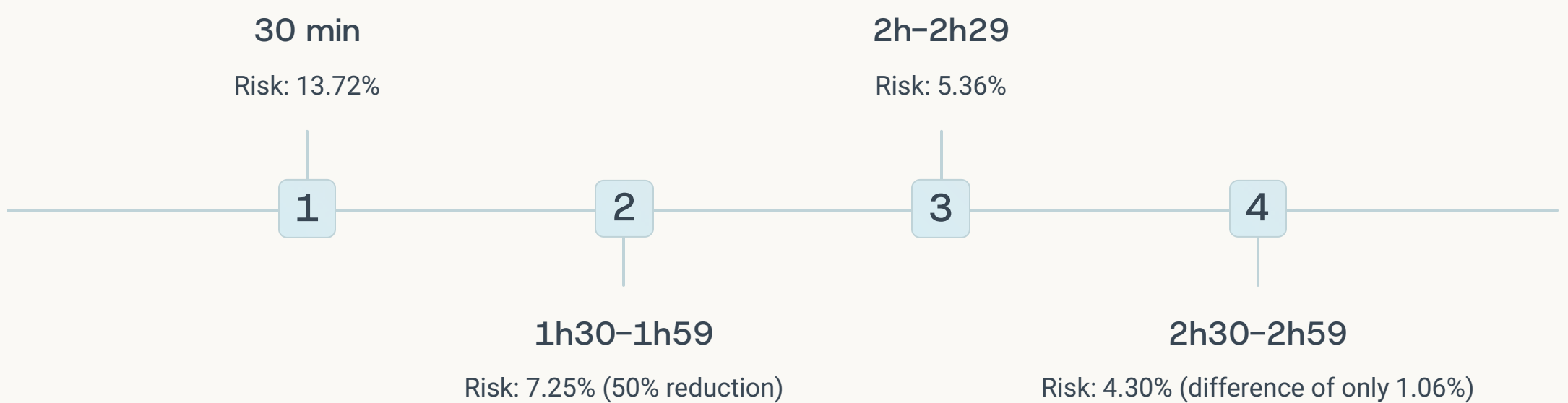


### 12-24h Interval

Most prevalent empty room time

## Safety Analysis: Reduced Intervals

67 urgent procedures were performed with less than 2h30 downtime (ranging from 30 minutes to 2h29) with no adverse reactions recorded. Statistical analysis revealed:



## Conclusions and Recommendations

### Safe Environment

Surgical center practically 100% latex-free. Only sterile surgical gloves and Foley catheters contain latex, replaced when necessary.

### Optimization Opportunity

Controlled reduction of downtime from 2h30 to 2h can be safely implemented, maintaining rigorous monitoring.

### Operational Benefits

Increased operating room efficiency, reduced waiting times, and direct benefit to patients, especially in a philanthropic institution.

**Important:** The progressive implementation of the new 2-hour interval will allow for an expanded sample and collection of additional data to more robustly evaluate the maintenance of assisted care safety.