

The one-minute ERAS pitch

For the corridor conversation with a sceptical colleague. Pocket card — print two-up.

If you have 15 seconds

“ERAS is a bundle of about twenty small perioperative changes. Together they cut complications by roughly a third and get people home one to three days sooner — without more readmissions. Most of them cost nothing.”

If you have 60 seconds

1. The mechanism. Surgery is an injury. The body responds with cortisol, insulin resistance and muscle breakdown. That response — not the incision — is what keeps people in bed. Every ERAS element shrinks it.

2. The evidence. Length of stay down one to three days. Complications down thirty to fifty per cent. Readmissions unchanged. That last point is what makes it safe rather than reckless.

3. The dose. It behaves like a drug. Deliver four elements out of twenty and you have usual care with extra paperwork. Deliver seventy to eighty per cent and you get the benefit.

4. The cost. Stopping the midnight fast, dropping routine bowel prep, not putting in the drain, taking the catheter out on day one, feeding and walking people — all free, all available on Monday.

5. The ask. “Can we pick five elements and measure them for three months?”

Answers to the four things they will say

They say	You say
“It won't work in our setting.”	“Which element specifically? Most of them are things we stop doing, not things we buy.”
“Early feeding causes leaks.”	“It has been tested repeatedly and it doesn't. Leak rates are unchanged; infection rates fall.”
“We're too short-staffed to mobilise people.”	“Agreed. So let's give patients a milestone card and teach the families — that's how we get the hours without new staff.”
“We already do ERAS — we discharge on day 3.”	“Short stay is the result, not the intervention. If we shorten stay without the elements, we just move complications into the community.”

Do not oversell it. Say plainly that most trials are in elective colorectal surgery, that the evidence in emergency surgery and low-resource settings is thinner, and that some elements carry strong recommendations on modest evidence. Saying this makes you more credible, not less.