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Total hip replacement for neck of femur fracture patients- comparing delivery of care and outcomes

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Aim: The aim of this review is to compare the delivery of care and outcome differences between total hip replacement (THR) performed for fractured neck of femur and elective THR at a District General Hospital.

Methods: Retrospective analyses of 20 consecutive patients undergoing THR for trauma were compared with 20 consecutive elective THRs. The patients were compared in terms of age, ASA (American Society of Anesthesiologists) score, number of comorbidities, length of stay from date of surgery, time to surgery, AMTS (Abbreviated Mental Test Score), mobility, discharge destination and the number of physiotherapy and occupational therapy sessions undertaken.

Results: A statistically significant difference in the post-operative length of stay was found between the groups (elective THR v THR for Fracture, 3.9 v 5.8 days $P < 0.05$; median length of stay 3 v 5 days). This difference was seen despite no statistical difference in the age, number of comorbidities or ASA scores of both groups. Further analysis shows that there was a significant difference in the number of physiotherapy sessions provided between the two groups (elective THR v THR for fracture, 1.46 v 1.24 sessions, $p < 0.05$). In addition, differences were also seen in the timing of initial occupational therapy assessment.

Discussion: Patients treated with elective THRs are not receiving the same post-operative care as those undergoing THR for trauma in our department. The main differences were seen in the number of physiotherapy sessions and the timing of the occupational therapy assessment. This is potentially contributing to an increased length of stay in the THRs performed for trauma.

Conclusion: We propose that the care of fractured neck of femur patients treated with THR needs to closer follow discharge pathways in place for elective THR.

Biography

Daniel Rossiter graduated from St George's Hospital Medical school in 2013 with a merit in basic sciences and a 1st class honours degree in Anatomy from King's college London. He became a specialist registrar on the Kent, Surrey and Sussex training scheme in 2017 and has spent his last two years at the Royal Surrey County hospital, Guildford. He has an interest in both trauma surgery and elective hip and knee orthopaedic surgery.

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