

Inpatient Rehabilitation Did Not Affect Patient Reported Outcomes 6 Month After Hip or Knee Arthroplasty.

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AIM:

The use of inpatient rehabilitation after hip and knee arthroplasty varies considerably between Australian States. In NSW inpatient post-operative rehabilitation is used in the vast majority of patients after hip or knee arthroplasty. This study examined patient satisfaction and patient reported outcomes (PROMS) at 6 months after surgery between subjects who attended inpatient rehabilitation and those who did not.

METHODS:

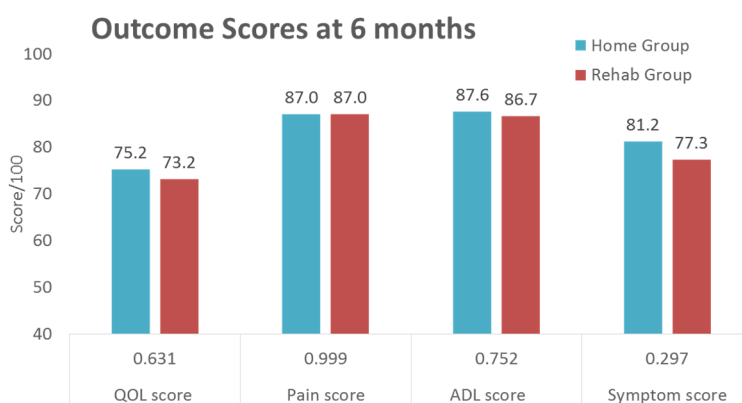
In the 2016 financial year 748 consecutive patients underwent hip or knee arthroplasty at the Mater Private Hospital under the care of the investigating surgeons and were included in a prospective database. Of these, 643 subjects (86%) completed preoperative and 6 month PROMS including Hip or Knee Osteoarthritis Outcome Score, Satisfaction scores and EQ5D. There were 44 patients who were discharged directly to home (Home Group). These subjects were matched for age, gender, procedure and surgeon to 44 patients who attended inpatient rehabilitation (Rehab Group). Six month PROMS scores were compared between those who attended inpatient rehabilitation and those who were discharged to home using SPSS version 24.

RESULTS:

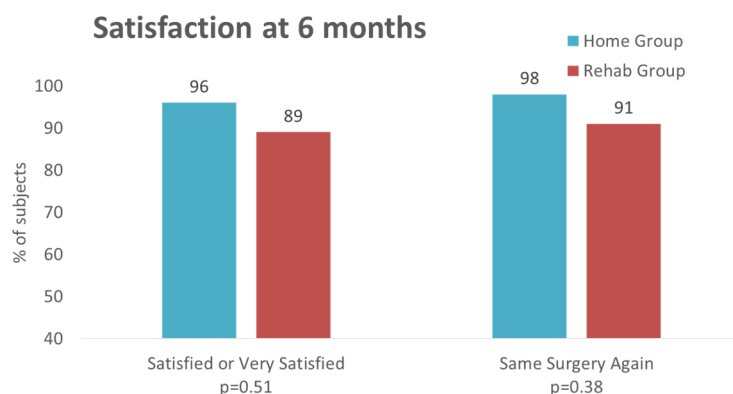
The mean length of stay in acute care hospital was 5 days in both groups. The median length of stay in inpatient reha-

bilitation of the Rehab group was 7 days (range 4-16 days).

Six months after surgery there was no significant difference between the Home Group and Rehab Group with respect to Quality of Life Score ($p=0.63$), Pain Score ($p=0.99$), ADL score ($p=0.75$) or Symptom Score ($p=0.30$) (Figure 1).



At 6 months there was no significant difference between the 2 groups on percentage of subjects satisfied with their surgery (Figure 2)



There was no significant difference between the groups for any other the EQ5D general health measures at 6 months.

CONCLUSIONS

Inpatient rehabilitation after hip or knee arthroplasty did not positively affect patient reported satisfaction, expectation, pain quality of life or ADL scores compared to subjects who were discharged to home at 6 months after surgery in an age, gender and procedure matched analysis.