

Outcomes of Fragility Hip Fracture in Elderly in a District Hospital, Malaysia

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INTRODUCTION:

Fragility hip Fracture (FHF) is common in the elderly and poses a substantial burden to the public hospitals in Malaysia. This study assessed the clinical and functional outcomes of elderly fragility hip fractures who had hip surgery.

METHODS:

A cross-sectional study was conducted on all elderly patients above 60 years old who underwent hip surgery from 1 January 2023 till 31 December 2023. The mean follow-up time was 6.2 months ± 4.

RESULTS:

A total of 64 patients underwent hip surgery in 2023. There was a female preponderance(65.6%) in FHF. Comorbid health conditions increased proportionally with age. 37 (57.8%) of the patients had sustained an extracapsular fracture whereas 27 (42.2%) had suffered an intracapsular fracture. Higher complications rate reported in intracapsular surgery patients. Only 13 (20.3%) patients underwent operation within three days. Surgery performed within 3 days is associated with better outcomes. However, there is no statistically significant complication rate for surgery performed within 3 or 5 days. We noted a significant deterioration in the Harris Hip Score from the median of 96.0(IQR 18.9) to 76.8 (IQR 38.2; p <0.001)

| | Number | Percentage,(%) |
|----------------------------|--------|----------------|
| Total episodes (n=) | | |
| Gender,n (%) | | |
| Female | 42 | 65.6 |
| Male | 22 | 34.4 |
| ASA status, n (%) | | |
| Class I | 6 | 9.4 |
| Class II | 32 | 50 |
| Class III | 23 | 35.9 |
| Class IV | 3 | 4.7 |

Operation Timing from Admission

| | | |
|-------|----|------|
| 0-3 | 13 | 20.3 |
| 4-5 | 13 | 20.3 |
| 6-10 | 15 | 23.4 |
| 11-15 | 16 | 25.0 |
| 15-20 | 7 | 10.9 |

Complication

| Complication | Surgery timing | |
|-------------------------|-----------------------------|-----------------------------|
| | Less than 3 days N=26(%) | More than 3 days N=38(%) |
| intubated | 0 | 5(7.8) |
| pneumonia | 0 | 7(10.9) |
| sepsis | 0 | 3(4.7) |
| deep vein thrombosis | 0 | 1(1.6) |
| pressure ulcer | 0 | 4(6.3) |
| re-admission | 0 | 3(4.7) |
| re-operation | 0 | 2(3.1) |
| myocardial infarction | 1(1.6) | 2(3.1) |
| Stroke | 0 | 1(1.6) |
| Chronic pain | 0 | 2(3.1) |
| Surgical site infection | 0 | 7 |
| mortality | 1(1.6) | 6(9.3) |

CONCLUSION:

Fragility hip fracture profoundly impacts a patient's mobility, functional status, and quality of life. This population requires more comprehensive pre-operative optimization and post-operative discharge and rehabilitation planning. The care should be part of multidisciplinary management.

REFERENCES:

1. American Academy of orthopedics Surgeon. Management of Hip Fracture in Older Adults.