

Poster Abstract: P1

Title:

Comparison of hip fracture mortality before and after introducing an Orthogeriatrics unit at Helen Joseph Hospital, Johannesburg.

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Introduction:

Hip fractures in elderly patients have a high in-hospital mortality. A comprehensive geriatric intervention has been shown to reduce the mortality rate. There is little evidence of the role of comprehensive geriatric intervention in management of acute hip fractures in Africa. Geriatric services only became available in state hospitals in Gauteng province, South Africa in early 2012. Our objectives were to assess the outcomes in older patients with hip fractures before and after the introduction of an Acute Orthogeriatrics Unit at Helen Joseph Hospital, a state facility for indigent patients in Johannesburg, South Africa.

Method:

Chart review for one year before and then 9 months after commencement of the geriatric intervention. The risk ratio was calculated comparing surgery and mortality pre and post the intervention, and was estimated for mortality adjusted for admission characteristics in a binomial regression model.

Results:

A total of 110 patients were reviewed, 50 (45%) received the geriatric intervention. Intervention patients were older (median 83 vs. 78 years, $p=0.11$) but were otherwise comparable to the pre-intervention group. The intervention patients were more likely to undergo surgery (86% vs. 50% [RR] 1.5 95% CI 1.2-1.9) and less likely to die (12% vs. 22%; [RR] 0.5 95% CI 0.2 ? 1.3).

Conclusion:

Geriatric intervention reduced in-hospital mortality and resulted in a higher proportion of patients receiving surgery. While the small number of patients studied requires caution in interpreting the results, the findings are suggestive of the effectiveness and feasibility of such an intervention even where resources are relatively scarce.