Paper #25

Prolonged Conservative Management in Total Joint Arthroplasty: Harming the Patient?

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Introduction: Indications for TJA have become a rationing tool for some insurance companies. Many modalities currently exist to delay the surgical procedure. We previously reported inferior postoperative outcomes at 3 years in patients that delayed their surgery. The purpose of this study was to assess outcomes in these patients in the mid to long term range.

Methods: Ninety-eight patients having a primary unilateral THA or TKA for osteoarthritis were assessed preoperatively and at a minimum of five years postoperatively using the WOMAC, SF-36, and Quality of Well-Being (QWB-7) scales. Patients were stratified into lower and higher preoperative functional level groups based on their preoperative WOMAC function score (≥51 and <51 points, respectively), and the lower and higher preoperative functional level groups statistically compared using Student's t-test ($\alpha = 0.05$).

Results: At an average 11.3 year follow up (range 5–21 years), both groups continued have improved scores when compared to their preoperative scores. However, all postoperative outcome measures continued to be inferior in those patients that delayed the surgery. The differences between the lower and higher preoperative functional level groups at follow up were statistically significant for the SF-36 physical functioning (43.5 (SE 4.7) vs. 54.6 (SE 2.9), $p = 0.048$), bodily pain (56.9 (SE 4.6) vs. 72.4 (SE 2.9), $p = 0.006$), and social functioning (64.4 (SE 5.0) vs. 80.0 (SE 2.4), $p = 0.006$) scores.

Conclusions: Although all patients in this cohort benefited from arthroplasty, at an average of 11.3 years postoperatively, the patients with lower preoperative function continued to present with greater functional impairment compared to the patients with higher preoperative function. Patients who allowed their function to deteriorate significantly before getting an arthroplasty did not fully "catch up" to those patients who had TJA at an earlier disease stage.

Notes