AB072. SOH21AS015. Second hip fracture workload across the 6 Dublin teaching hospitals

Ben Murphy¹, Colum Downey², Stephen Flannery², Tiernan Daly³, Sarah Conway⁴, Mohammed Gaffar⁵, Peter Dawson⁶, Denis Collins⁴, Paddy Kenny³, Tom McCarthy⁵, James Cashman⁶, Conor Hurson¹, Brendan O'Daly⁷, John Quinlan⁸

¹Department of Trauma & Orthopaedic Surgery, St Vincent's University Hospital, Dublin, Ireland; ²Department of Trauma & Orthopaedic Surgery, Tallaght University Hospital, Dublin, Ireland; ³Department of Trauma & Orthopaedic Surgery, Connolly Hospital Blanchardstown, Dublin, Ireland; ⁴Department of Trauma & Orthopaedic Surgery, Beaumont Hospital, Dublin, Ireland; ⁵Department of Trauma & Orthopaedic Surgery, St James' Hospital, Dublin, Ireland; ⁶Department of Trauma & Orthopaedic Surgery, Mater Misericordiae University Hospital, Dublin, Ireland

Background: Hip fractures are a common presentation to Irish hospitals with 3,751 hip fractures recorded by 16 hospitals in the Irish Hip Fracture Database (IHFD) in 2018. Second hip fractures (HF2) make up a significant proportion of hip fractures and represent an opportunity to prevent subsequent fragility fracture.

Methods: Hip fracture datasheets from 2019 in six Dublin hospitals were analysed.

Results: In 2019, 1,284 hip fractures in total were recorded in these 6 hospitals. One hundred and twelve of these were second hip fractures (8.72%). 24.1% of patients had a HF2 in year 1 post their first hip fracture (HF1). 14.3% of patients had a HF2 in Year 2, 8% in Year 3, 8.9% in Year 4 and 6.3% in Year 5. 17.9% of patients had an HF2 at an unknown time in relation to their HF1. 57.6% of all patients with any hip fracture were started on bone protection medications (BPMs) during their admission. 18.9% continued a pre-admission prescription. 7% of all patients were previously assessed and determined not to require BPM. 6.9% of patients were awaiting outpatient department (OPD) assessment for bone protection. 8.6% had no assessment for bone protection conducted. Of all patients with an HF2, 48.2% were started on BPMs on admission with their HF2. 33% continued BPMs started pre-admission.

Conclusions: In 2019, approximately 1 in 10 hip fractures were second hip fractures. Evidence suggests that fracture liaison services represent a viable, economic means of preventing second hip fractures to improve patient outcomes and reduce healthcare expenditure.

Keywords: Fracture prevention; fragility fracture; hip fracture; Irish Hip Fracture Database (IHFD); osteoporosis

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at http://dx.doi.org/10.21037/map-21-ab072). The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.

doi: 10.21037/map-21-ab072