

Preoperative Pain Catastrophizing, Depression, and Anxiety in Total Hip Arthroplasty Patients with Differing Radiographic Severity

Vanessa Elena Lopez¹, Cesar Sevilla Jr, Isabella Amado, Ruthvik Reddy Allala, Yin Xi², Edward P Mulligan, Avneesh Chhabra, Joel E Wells³

¹University of Texas Rio Grande Valley School of Medicine, ²UT Southwestern Medical Center, ³The Comprehensive Hip Center

INTRODUCTION: Comorbid mood disorders and pain catastrophizing behavior in patients with hip osteoarthritis have been associated with worse pain scores and more functional limitations before and after undergoing a total hip arthroplasty (THA). There remain questions regarding the relationship between severity of hip disease and mental health factors on preoperative measures in patients with differing radiographic disease. The purpose of this study was to assess preoperative pain catastrophizing, depression, and anxiety scores in THA patients with less severe radiographic hip arthritis compared to those with more severe radiographic disease.

METHODS: A total of 785 patients were enrolled in a prospective cohort of THA patients at a tertiary hip program over a 5-year period. Study participation consisted of preoperative and postoperative survey completion with a minimum of 1-year postoperative follow up. The Pain Catastrophizing Scale (PCS) was used to assess for pain catastrophizing. The Hospital Anxiety and Depression Scale (HADS-A, HADS-D) was used to assess for anxiety and depression. Radiographic severity was assessed using preoperative radiographs and was graded with the Tönnis classification of osteoarthritis and joint space width.

RESULTS: Preoperative and postoperative surveys were completed for 411 patients. Preoperatively, 58 patients (14.11%) had a clinically relevant PCS score, 53 patients (12.90%) had an abnormal HADS-D score, and 53 patients (12.90%) had an abnormal HADS-A score. Tönnis Grade 0/1 patients had more abnormal preoperative HADS-A scores than Tönnis Grade 2/3 patients (20.51% vs. 11.11%, $p = 0.038$). There were no statistically significant differences in the preoperative PCS ($p = 0.104$) and HADS-D ($p = 0.188$) scores between Tönnis Grade 0/1 patients and Tönnis Grade 2/3 patients.

DISCUSSION AND CONCLUSION:

There are many factors that contribute to an orthopaedic patient's decision to undergo a THA, including their perspective on the severity of their disease and other psychological factors. In our study, patients with higher levels of anxiety were found to have less severe radiographic hip disease. This suggests that patients with clinically relevant anxiety were more likely to undergo a THA earlier in the course of their hip pathology rather than continuing with conservative management until they progress to end-stage disease.

Our study demonstrates that patients with greater anxiety scores had less severe radiographic disease. There was no difference in pain catastrophizing and depression scores between groups of less and more severe hip disease.

Table 1 Preoperative and Postoperative Pain Catastrophizing Scores and HADS Scores Stratified by Tönnis Grade				Table 2 Total Hip Arthroplasty Patient Characteristics Stratified by Tönnis Grade				Table 3 Total Hip Arthroplasty Patient Characteristics Stratified by Preoperative Pain Catastrophizing Score				Table 4 Total Hip Arthroplasty Patient Characteristics Stratified by Hospital Anxiety and Depression Scale - Anxiety Subscale Score			
Characteristic	0/1 (n=102)	2/3 (n=178)	P Value	Grade	0/1 (n=102)	2/3 (n=178)	P Value	Score	0/1 (n=102)	2/3 (n=178)	P Value	Score	0/1 (n=102)	2/3 (n=178)	P Value
Female (%)	95.10	95.45	0.95	Female (%)	95.10	95.45	0.95	Female (%)	95.10	95.45	0.95	Female (%)	95.10	95.45	0.95
Age (years)	68.5	68.5	0.95	Age (years)	68.5	68.5	0.95	Age (years)	68.5	68.5	0.95	Age (years)	68.5	68.5	0.95
Weight (kg)	78.5	78.5	0.95	Weight (kg)	78.5	78.5	0.95	Weight (kg)	78.5	78.5	0.95	Weight (kg)	78.5	78.5	0.95
Height (cm)	168.5	168.5	0.95	Height (cm)	168.5	168.5	0.95	Height (cm)	168.5	168.5	0.95	Height (cm)	168.5	168.5	0.95
Preoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Preoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Preoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Preoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104
Postoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Postoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Postoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104	Postoperative PCS (mean±SD)	1.2±1.5	1.2±1.5	0.104
HADS-A (mean±SD)	11.1	11.1	0.038	HADS-A (mean±SD)	11.1	11.1	0.038	HADS-A (mean±SD)	11.1	11.1	0.038	HADS-A (mean±SD)	11.1	11.1	0.038
HADS-D (mean±SD)	12.9	12.9	0.188	HADS-D (mean±SD)	12.9	12.9	0.188	HADS-D (mean±SD)	12.9	12.9	0.188	HADS-D (mean±SD)	12.9	12.9	0.188