Unplanned Healthcare Encounters after Total Joint Arthroplasty are More Common than We Think

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Unplanned healthcare encounters may occur after primary total joint arthroplasty (TJA). We seek to investigate the rate at which patients interact with the healthcare system outside of their scheduled routine follow-up appointments following TJA. Furthermore, we seek to determine if there are differences between total hip (THA) and total knee arthroplasty (TKA) patients in the likelihood of having additional, unplanned, healthcare encounters.

METHODS:

Using prospective data from a large, multicenter study, the Comparative Effectiveness of Pulmonary Embolism Prevention After Hip and Knee Replacement (ClinicalTrials.gov: NCT02810704) we report on unplanned healthcare encounters for patients undergoing TJA. Patients receiving either primary TKA or THA were identified. Demographic information included age, sex, education, year of surgery, Charlson comorbidity index (CCI), BMI, and length of stay (LOS). Descriptive analytics were performed to determine the incidence of unplanned healthcare encounters to a physician, the emergency room, hospitalization, or a reoperation. Continuous variables were analyzed via a Student t-test. Chi-squared analysis was used to analyze categorical variables. P value of <0.05 was considered significant. RESULTS:

Between 2017 and 4/2022, outcomes from 11,071 participants were examined (5,218 THA, 5,853 TKA) with 1 months follow up, 10,498 (4,930 THA, 5,569 TKA) with 3 months follow up, and 9,835 (4,600 THA, 5,235 TKA) had 6 months follow up. Unplanned physician visits were reported in 13.7% of patients at 1 month, 20.2% at 3 months, and 25.9% at 6 months. TKA, CCI, and longer LOS were significant predictors of unplanned physician visits. Unplanned Emergency Room visits were reported in 9.3% of patients at 1 month, 12% at 3 months, and 14.8% at 6 months with age, lower education, CCI, and longer LOS being significant. Unplanned hospitalizations were reported in 4.2% of patients at 1 month, 7.7% at 3 months, and 11.5% at 6 months with age, lower education, CCI, and longer LOS being significant. In regard to unplanned reoperations, 1.9% of patients reported them at 1 month, 5.7% at 3 months, and 9.4% at 6 months with age, CCI, and longer LOS being significant. TKA patients reported increased reoperations at 3 months. DISCUSSION AND CONCLUSION:

Unplanned visits to a physician, the Emergency Room, hospitalizations, and reoperations after primary TJA may be much higher than expected especially in older patients with more medical comorbidities who have a longer LOS after their TJA. TKA patients reported more physician visits at all timepoints and more reoperations at 3 months.