Social Determinants of Health Increase Five-Year Revision Rates Following Primary Hip Arthroscopy

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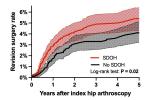
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INTRODUCTION: The impact of social determinants of health (SDOH) on outcomes has become increasingly emphasized across orthopaedic surgery. However, to date, there exists limited research assessing the role of SDOH in hip arthroscopy. The purpose of the present study was to investigate the impact of SDOH on 30-day emergency department (ED) visits, 90-day postoperative complications, and five-year revision rates after primary hip arthroscopy using a large national database.

METHODS: A national administrative claims database was used to identify patients who underwent primary hip arthroscopy with femoroplasty, acetabuloplasty, and/or labral repair between 2015 and 2022. Patients were queried for whether they experienced any SDOH, including economic, educational, environmental, or social disparities; those experiencing SDOH within 1 year prior to primary hip arthroscopy were matched 1:1 by age, sex, Elixhauser Comorbidity Index score, diabetes, obesity, and tobacco use to patients not experiencing any lifetime SDOH. Rates of 90-day complications and 30-day ED visits were compared using multivariable logistic regression. Rates of revision hip arthroscopy within five years were compared by Kaplan-Meier analysis.

RESULTS: A total of 3,383 primary hip arthroscopy patients who experienced SDOH were matched 1:1 to a control cohort of 3,383 patients who had not experienced SDOH (age, 41.0 years, 79.6% female, for both cohorts) (**Table 1**). Rates of adverse events following arthroscopy were low and not significantly different between cohorts (SDOH: 1.51%, vs. No SDOH: 1.57%; p>0.05) (**Table 2**). Additionally, there was no significant difference in rates of 30-day ED visits (SDOH: 5.65%, vs. No SDOH: 4.79%; p>0.05) (**Table 3**). The rate of five-year revision hip arthroscopy was significantly greater among patients experiencing SDOH (5.4% vs. 4.1%; p=0.02) (**Figure 1**).

DISCUSSION AND CONCLUSION: Patients experiencing SDOH within one year prior to primary hip arthroscopy had similar rates of postoperative complications and ED visits but greater odds of five-year revision hip arthroscopy compared to a matched-control cohort of patients not experiencing SDOH. These data highlight the significant impact of SDOH on long-term postoperative outcomes and bring to light the growing importance of multidisciplinary, culturally-competent orthopaedic care that equitably improves the health of all patients.



	Unmatched					Matched				
	No SDOH		SDOH		P- value	No SDOH		SDOH		P. value
	Value	%	Value	%		Value	%	Value	%	
Sample size	33,584	90.3%	3,621			3,383	50.0%	3,383	50.0%	
Age, mean (SD), years	36.2	(13.6)	41.2	(12.0)	< 0.001	41.0	(12.0)	41.0	(11.9)	0.953
<20	5,050	15.0%	180	5.0%		174	5.1%	174	5.1%	
20-29	6,717	20.0%	461	12.7%		428	12.7%	428	12.7%	
30-39	7,574	22.6%	917	25.3%		865	25.6%	865	25.6%	
40-49	7,951	23.7%	1126	31.1%		1,061	31.4%	1061	31.4%	
50-59	4,855	14.5%	722	19.9%		673	19.5%	673	19.9%	
60-69	1,437	4.3%	215	5.9%		182	5.4%	182	5.4%	
Sex					< 0.001					>0.99
Male	10,686	31.8%	753	20.8%		690	20.4%	690	20.4%	
Female	22,898	68.2%	2868	79.2%		2,693	29.6%	2,693	79.6%	
ECI score, mean (SD)	2.04	(2.10)	4.06	(3.08)	< 0.001	3.63	(2.55)	3.63	(2.55)	>0.99
0	8,388	25.0%	247	6.8%		247	7.3%	247	7.354	
1-2	14,683	43.7%	1063	29.4%		1,058	31.3%	1058	31.3%	
3.4	6,546	19.5%	986	27.2%		984	29.1%	984	29.1%	
>5	3,967	11.8%	1325	36.6%		1,094	32,3%	1094	32.3%	
Comorbidities										
Diabetes	3,598	10.7%	816	22.5%	<0.001	676	20.0%	676	20.0%	>0.99
Obesity	7,975	23.7%	1564	43.2%	<0.001	1,409	41.6%	1,409	41.6%	>0.99
Tobacco use	8,383	25.0%	1253	34.6%	<0.001	1,128	33.3%	1,128	33.3%	>0.99
Disparity Type					N/A					NA
Economic	0	0.0%	3199	88.1%		0	0.0%	2970	87.8%	
Educational	0	0.0%	221	6.1%		0	0.0%	195	5.8%	
Environmental	0	0.0%	182	5.0%		0	0.0%	166	4.9%	
Social	0	0.0%	730	20.2%		0	0.0%	672	19.9%	
Patients with SDOH w										
Comorbidity Index (EC		inciden	ce of di	abetes, o	besity, at	nd tobac	co use. S	iD: stan	dard	
deviation; NA, not appi	licable.									

Complication	SDOH		No:	SDOH	Odds Ratio (relative to no SDOII)	95% Confidence Interval	P-value
	N	%	N	%			
Total sample	3,383	50.0%	3,383	50.0%			
Any adverse event (AAE)	51	1.51%	53	1.57%	0.88	0.77-1.02	0.090
Wound dehiscence	10	0.30%	14	0.41%	0.69	0.50-0.94	0.021
Surgical site infection	7	0.21%	10	0.30%	0.99	0.74-1.33	0.953
Nerve injury	11	0.33%	9	0.27%	1.08	0.85-1.37	0.543
Hernatorna	4	0.12%	5	0.15%	0.85	0.59-1.22	0.371
Sepsis	7	0.21%	2	0.06%	0.79	0.59-1.05	0.100
Deep venous thrombosis	33	0.98%	27	0.80%	0.76	0.60-0.96	0.026
Pulmonary embolism	10	0.70%	3	0.09%	0.68	0.46.0.98	0.035

Variable	N, total	N, ED visits	%	OR	95% CI		P-value	
Total	6,766	353	5.22%					
SDOH?								
Yes	3,383	191	5.65%	1.20	0.96	1.49	0.104	
No	3,383	162	4.79%					
Age								
<20	348	23	6.61%	1.38	0.81	2.29	0.225	
20-29	856	48	5.61%					
30-39	1,730	112	6.47%	0.98	0.69	1.41	0.898	
40-49	2,122	102	4.81%	0.63	0.44	0.91	0.013	
50-59	1,346	48	3.57%	0.45	0.30	0.69	<0.001	
60-69	364	18	4.95%	0.60	0.33	1.05	0.082	
Sex								
Male	1,380	58	4.20%	0.83	0.61	1.10	0.201	
Female	5,386	293	5.44%					
ECI score								
0	494	15	3.04%					
1-2	2,116	78	3.69%	0.97	0.60	1.67	0.923	
3-4	1,968	74	3.76%	0.90	0.54	1.57	0.709	
≥5	2,188	184	8.41%	2.18	1.33	3.76	0.003	
Select comorbidities								
Diabetes	1,352	38	2.81%	1.11	0.84	1.45	0.453	
Obesity	2,818	98	3.48%	1.21	0.95	1.53	0.124	
Tobacco	2.256	108	4.79%	1.32	1.05	1.66	0.019	
Sumbers and percentag sids ratios (ORs), 95% iD visits. Bold indicate nultivariate logistic reg nterval; Abbreviations: scalth.	confidence i s statistical s ression analy	ntervals (Ci ignificance esis. SD: sta	ls), and P-v (P<0.05). I indard devi	alues for s Dashes inc ation; OR	ignifican licate ref odds rat	n associa erent cate io; CI: ec	tion with gories for enfidence	