Life's simple 7 score is independent risk factor for postoperative delirium following total knee arthroplasty

Ju-Ho Song, Young Mo Kim, Yong Bum Joo, Byungkuk An, Jaeyoung Park INTRODUCTION:

Life's Simple 7 score is a new measure of cardiovascular health (CVH) published by the American Heart Association (AH A) in 2010 to track health status in relation to a 2020 strategic goal to improve CVH of Americans. Life's Simple 7 is based on 4 modifiable health behaviors, including nonsmoking, healthy diet, physical activity, and body mass index (BMI), and 3 modifiable biological factors, including blood pressure (BP), total cholesterol, and fasting glucose (Table 1). The aim of this retrospective study was to determine whether Life simple 7 score may be associated with postoperative delirium after total knee arthroplasty(TKA). We hypothesized that POD would occur at a higher rate among patients who had low Life's simple 7 score.

METHODS:

The data described in this study was limited, because it was retrospectively obtained from medical chart review. We enroll ed 1061 patients who had undergone TKA from January 2012 to January 2020. We excluded patients who underwent TK A bilaterally and those undergoing revision TKA. Finally, a total of 973 out of 1061 eligible patients were included in the st udy.

RESULTS:

A total of 973 patients were included in the study. Table 2, 3 outlines several differences in categorical variable analysis b etween the two groups. As a result of Chi-

squared test & Fisher's exact test, sex(male), type of anesthesia(nerve block), preoperatively duloxetine administration, p ostoperatively transfusion, intraoperatively hypothesion and intraoperatively hypothermia were found to be statistically significant. Among the underlying disease, statistically significant results were found in HTN, DM, renal disease, solid tumor, Parkinson's disease, and insomnia. Table 4 shows the T-

test results for continuous variable analysis, and statistically significant results were obtained in age, life simple 7 score, c harlson comorbidity index, BUN, and Cr.

As a result of obtaining the odds ratio for each variable through multivariate logistic regression analysis (table 5), statistica lly significant results were found in differences in type of anesthesia (comparing general anesthesia and nerve block), pre operatively duloxetine administration, Parkinson's disease, intraoperatively hypotension, age at surgery, and life simple 7 score. Among them, the largest odds ratio was obtained from the difference in anesthesia method comparing general ane sthesia and nerve block (244,637) so it was significantly associated with postoperative delirium. Next, Age (1.074), Life si mple 7 score (0.446), Intraop hypotension (0.194), Duloxetine (0.171), Parkinson's disease (0.126) in that order Odds ratio is high.

DISCUSSION AND CONCLUSION:

In the present study, type of anesthesia (comparing general anesthesia and nerve block), preoperatively duloxetine admin istration, Parkinson's disease, intraoperatively hypotension, age at surgery, and life simple 7 score were identified as independent risk factors for postoperative delirium following a TKA. In particular, type of anesthesia (comparing general anest hesia and nerve block) was most significant risk factor for postoperative delirium.

The second factor with the highest odds ratio was the age of the patient at the time of surgery. It is explained that this occ urs as the brain ages, the brain capacity declines, which causes anatomical changes of loss of synapses of nerve cells an d changes in neurotransmitters occur, resulting in difficulties in memory and concentration which can result in the sympto m of delirium.

The life simple 7 score, the hypothesis of this study, was the third highest odd-

ratio factor. High cardiovascular health (CVH) can be thought of as lowering the risk of postoperative delirium.

Preoperative duloxetine administration is associated with increased POD

Underlying Parkinson's disease is predictors for POD.

Component	Ideal (2 Paints)	Internediate (f. Folia)	Paor (D Rollet)
Smoking	New or former +1 year	Parmer sit year	Current
Nothy set your	A to 5 points	2 to 5 points	0 to 1 points
Physical activity	s4 bouts per week of intense physical activity sufficient to work up a sweet	1 to 3 bouts per week of interne physical activity sufficient to work up a sweet	his interne physical activity sufficient to work up a sweet
Body mass Index	+25 light ²		
Bood pressure	+120,00 mm/sg urbered	SSP 130 to 139 or CSP 00 to 09 merity or treated to ideal level	
Total cholesterol	-S18 mns/L (-000 mg(0) urosated	S.16 to 6.19 minolis. G00 to 239 mg/Ot or Swated to ideal level	1622 mns(s (s24 mg/d)
Serving gluone	+5.55 mme(1, (+100 mg/D) universited	5.55 to 604 remotil, (300 to 125 mg/OE or treated to ideal level	2599 mme(1, 024 mg/d)

Factors	Group I (n × 60)	\$100 X 51 × 5131	2
	Geleve	(Nen Delinum)	
Sec			8.1
Mde	17	128	
femde	A3	795	
Aresthesia			0.0
Seneral	45	865	
Spinal	4	26	
Name Stock	1	2	
Monhel			- 11
CI / medi	10	100	
247 668	2	4	
14 / mark	0	10	
ASA grade			8.3
	2	14	
	84	797	
	14	191	
Dalowone (N)	17 (08.0)	101.01.0	2.1
Sabapantin or	13 (21.7)	192.21.0	2.0
Pregabalin (%)			
Peop speed (%)	81 (88.0)	101 (18.6)	8.7
Fedog opicial (No.	14 (40.0)	779 (94.5)	10
PCA:00	58 (98.7)	102 (07.5)	2.0
Transfusion (N)	45 (75.0)	796 (96.1)	8.1
SHD spret (N)	915.01	50.55	1.2
MO Not No	5 (5 (8)	86 (65)	2.1
Intrap hypotention (N)	12.08	57 62	8.1
Intraco hypothemia (N)	11 (983)	59.65	2.5

Fasters	Group I (n x 60)	Group I (n x 813)	Fiel
	(Delinion)	Plon Delitions	
Underlying disease			_
HTM PO	52 (862)	625 (68.5)	E.000
D84 (%)	27 (85.0)	215 (233)	E.00
coro (ni		34 (15)	1.000
Adma (N)		17 (15)	1.000
Antythnia (%)	10.0	10 (L1)	6.75
crasi	8 (11.0)	22 (23)	6.16
MON	1012	\$1 (53)	6.00
Rend shows (%)	6 (100)	10 (1.1)	8.011
User disease PG	4 (67)	27 (50)	6.116
Sold turner (No	TOTA	43 (AT)	0.62
Denertio (%)	2 (3.5)	8 (6.9)	6.12
Parkinson's disease (N)	5 (8.5)	1.00	6.000
Insomnia (%)		185	£.00

Factors	Group I (n x 80)	Group II in a SER	Fulla
	(Delinion)	(Non Delinium)	
Age	1848 ± 520	58.95 ± 7.65	0.000
Op time	16531 ± 1465	19530 ± 1222	0.975
Height	112.64 +9.56	153.50 + 7.26	0360
Ew1	6229 ± 1127	6225 ± 1025	0363
Life simple T	688 ±125	8.85 ± 1.66	0.000
Charlest conorbidity	422 ± 138	540 ± 1.73	0.000
Iroles (DCI)			
	Peop la		
His	127 x 1.88	122 x 1.86	0.667
Ha	15.74 × 6.66	H.42 x 400	0.171
Alle	579 ± 0.46	5.88 ± 6.99	0.149
N/N	1747 x 5.86	15.86 x 5.41	0011
	082 x 023	0.72 x 8.47	0003
No	148.56 ± 2.73	14030 ± 101	0.726
K	415 ± 037	410 x 840	0.795
CI	100.86 x 2.62	19420 x 3.30	0.285
P	354 x 058	232 x 836	0.386
Gr.	66f x 037	8.91 x 6.59	0.191

Factors	Oldri satio	DASK ratio 19% CT		Pinte
		Low	Kigh.	1
Sex	0.699	1,296	1.636	1.410
Andreis	244.617	12,347	4896654	8.800
General - Nome block				
Dulovetine	0371	9,812	0.405	1.000
Danetsion	1.063	9.377	2.607	1.995
HTN	0.586	9.235	1.534	1304
DAM.	1,060	3.647	5346	1249
Renal disease	0.962	9.229	3560	1.855
Solid tumer	0.532	9.731	2.191	6,375
Parkinson's disease	0.126	9.822	0.715	1.019
Insomnia	0.029	9,904	1.872	8,100
Intrace hypotension	0.194	9,875	0.505	8.808
Interp hypothemia	0.496	9,138	1,584	6.380
Age	1.074	1.805	1.146	8.855
Life simple 7 some	0.686	9.331	0.601	8.800
001	1.80	0.848	1.821	1.096
E/N	0.967	9.896	1,842	6,379
	1.643	9.661	4389	1285

