

AB225. 164. Post-operative outcomes in the orthogeriatric population following a proximal femur fracture—a retrospective study

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Background: Hip fractures in elderly patients are associated with a poor postoperative outcome and a high mortality. Malnutrition is a frequent problem in elderly patients and may be associated with poorer outcomes in the postoperative period. We aim was to determine the effect of the nutritional status, time to theatre, AO proximal femur classification, cognitive status/delirium and infection on postoperative outcomes.

Methods: Patients with a hip fracture, who had surgery from January 1st, 2016 until August 31st, 2017, were included in our retrospective study. Length of stay (LOS), classification of hip fracture, operation classification, blood transfusion rates, post-operative complications, admission

bloods and discharge location were all documented. Data was anonymised and analysed using SPSS v20.

Results: A total of 191 patients were included in our study, 70.2% were female and 29.8% were male. The mean age was 81.19 (8.04) years and mean LOS was 26.10 (25.89) days. Only 42.1% of all participants had their iron levels checked if they were anaemic on admission, of which 63.8% were iron deficient. There was a significant correlation (P<0.05) between vitamin D deficiency, anaemia and LOS. There was a significant (P<0.05) difference between mean LOS in those who were iron deficient and those who were iron replete. Fifty-five per cent of the population were vitamin D insufficient or deficient.

Conclusions: Malnutrition is correlated with an increased length of stay and further complications post operatively. Screening and specific bloods must be incorporated into admission plans so that patients who are high risk of having complications may be identified.

Keywords: Orthopaedic; orthogeriatrics; nutrition; hip fracture; geriatrics

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