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The Impact of COVID-19 on a Hip Fracture Service

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ABSTRACT

This retrospective observational study analysed the impact of the initial COVID-19 surge on the hip fracture population in a high-volume tertiary trauma centre. The study analysed a two-month period following the onset of lockdown from the 24th March 2020 to 23rd May 2020 and compared this to the same two-month time period in the years 2015-2019. It included patients over 60 years old who were admitted with a hip fracture. It excluded patients with high-energy injuries and pathological fractures.

During the study period in 2020, 126 hip fracture patients were included, compared to an average of 114.8 patients per year in 2015-2019. This suggests that despite nationwide advice to avoid unnecessary social contact and remain at home where possible, a cohort of patients will continue to fall and sustain hip fractures.

Aerosol generating procedures were avoided where possible in 2020, with an increased use of neuraxial over general anaesthesia demonstrated (p=0.0001).

30-day mortality in 2020 was also similar to 2015-2019 for both surgically and conservatively managed patients, highlighting the ability to maintain high standards of care despite the organisational changes made during surge planning.

Only 7.1% of patients tested positive for COVID-19, all of which were operated on (9/122 positive, 113/122 negative, 4/122 no result). The 30-day mortality rate of COVID-19 positive patients was 22%, compared to 2.7% in COVID-19 negative patients (p=0.05).

This study demonstrates the ability to maintain an effective hip fracture service with largely unchanged outcomes during the height of the COVID-19 pandemic. Strengths of the study included robust follow-up and the ability to compare our results to retrospective pre-pandemic data. The study also suggested increased mortality in COVID-19 positive patients undergoing surgical management. The inclusion of only nine COVID-19 patients and the high rates of spinal anaesthesia may limit conclusions, with further research warranted to answer questions raised, such as timing of surgery in COVID-19 positive patients who require hip fracture surgery.

Keywords: Surgical management, Surge planning, COVID-19, High-energy injuries

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