

Hospitals ranked on complications after hip and knee replacement surgeries

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With an aging population comes an increase in hip and knee joint replacement surgeries, totaling almost one million procedures per year in the United States. To provide better information on the outcomes of these surgeries, help inform patient choice, and improve the quality of the nation's hospitals, a team of Yale School of Medicine researchers have developed a measure for hospitals based on the complications following their patients' hip and knee replacements.

The team published an article in the May issue of the Journal of Bone



and Joint Surgery showing there are important differences in outcomes across hospitals for these common <u>surgeries</u>. The authors, who are part of the Yale Center for Outcomes Research and Evaluation (CORE), teamed up with leading orthopedic surgeons—including lead author Kevin Bozic of the University of California, San Francisco—and quality experts from the Centers for Medicare & Medicaid Services (CMS) to develop the measure.

The most common complications after hip and <u>knee replacement</u> surgeries are pneumonia, pulmonary embolism, and joint or wound infection, the authors say.

"We found a four-fold difference in risk-adjusted complication rates across hospitals, suggesting some hospitals have substantial room for improvement when it comes to these surgeries," said senior author Elizabeth Drye, M.D., research scientist at Yale School of Medicine and a director of CORE.

"We also looked for, but did not find, evidence of disparities in outcomes," Drye added. "It was reassuring to find that hospitals caring for higher proportions of Medicaid-eligible or black patients did not have higher complication rates."

The <u>hospital</u> measure scores are currently publicly reported for all U.S. hospitals; results are posted at http://www.medicare.gov/hospitalcompare/search.html

Drye and her colleagues also developed a measure of the nation's hospitals based on readmissions at 30 days, which is also reported on the Hospital Compare site. CORE co-author Lisa Suter, working with CMS, is currently leading an effort to develop an outcome measure of patients' functional status following these surgeries.



"Hip and knee replacements are high-volume, costly, and beneficial procedures, and we hope our work will improve how well patients recover after having these surgeries," said Drye.

More information: *Journal of Bone and Joint Surgery*: www.ncbi.nlm.nih.gov/pubmed/24740660

Provided by Yale University

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