

Examining the Prevalence of Falls and Future Falls Risk in Adults One-Year After Total Hip Arthroplasty

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Background

- One in three older adults fall each year
- People with hip osteoarthritis have an elevated annual falls prevalence of 45%.
- Hip osteoarthritis can be treated with total hip arthroplasty (THA)
 - the effect of THA on falls risk has received limited attention

Objectives:

1. Estimate the prevalence of falls in the 12 months following THA surgery
2. Evaluate future falls risk at one year after surgery.

Relevance to physiotherapy:

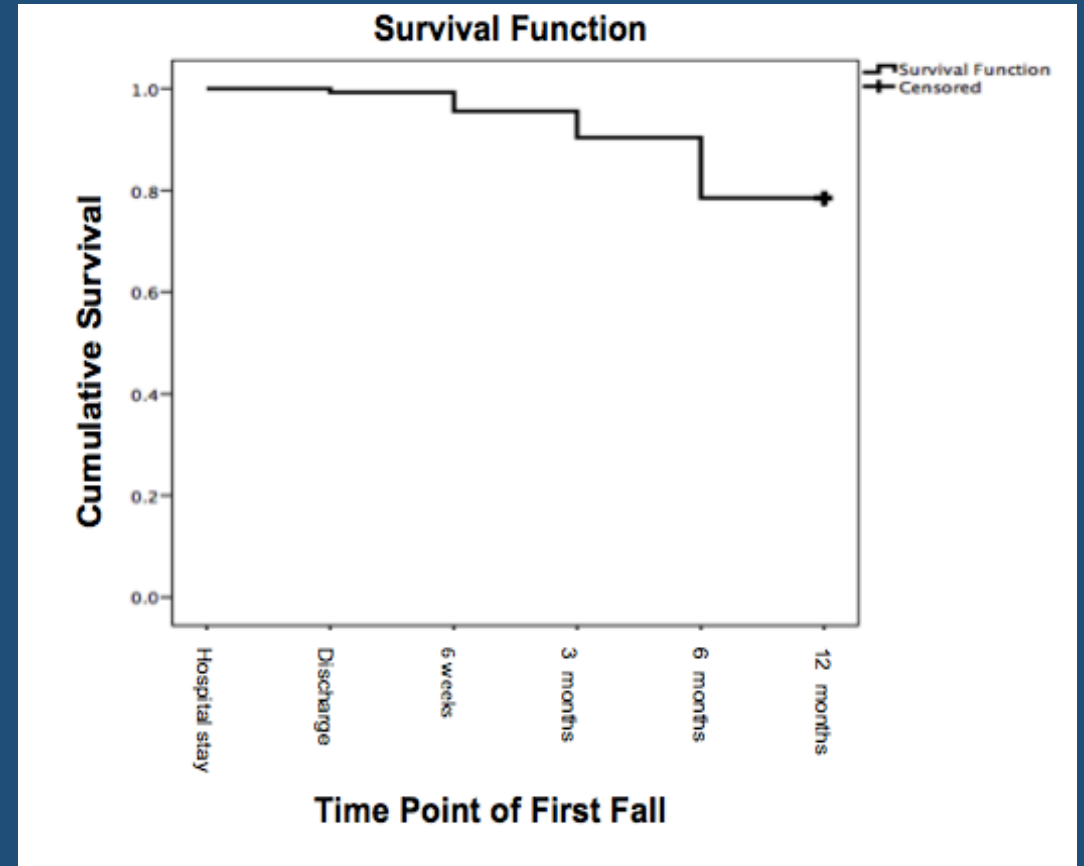
- Prominent role of physiotherapy in THA post-operative rehabilitation
- Assessment and treatment of adults at risk for falls in general

Methods

- Design: cross-sectional
- Participants: 50+ years of age recruited at their one-year follow-up for THA surgery.
- The Falls Risk For Older People in a Community Setting Questionnaire (FROP-Com) was used to assess falls risk
- Physical performance tests:
 - Step Test.
 - The 30-Second Chair Stand test (30CST)
 - Gait velocity
 - Timed Up-and-Go (TUG)
- Results on physical measures compared with average scores for community dwelling older adults to determine the percentage of participants below

Results

- 29 (21.5%) people had at least one fall
 - The greatest number of falls occurred 6-12 months after surgery.
- Step Test
 - 83.5% had deficits in operative leg
- TUG
 - 77.6% had deficits
- 30CST
 - 65.7% had deficits
- Gait speed
 - 21.6% walked slower than 1m/s



Conclusions

- Falls prevalence was lower than the general risk for older adults and individuals with hip osteoarthritis before surgery.
- One year after surgery, the majority of participants presented with deficits in strength, balance and gait that would increase the likelihood of a fall.
 - These factors are potentially modifiable with physiotherapy