

# Patient Centeredness in Total Joint Replacement Beyond the Slogan

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## KEYWORDS

• Patient-centered care • Total joint replacement • Orthopedic surgery • Health policy

## KEY POINTS

- PCC is a fundamental principle that, although fully developed theoretically, is still in its youth in terms of clinical application.
- PCC in orthopedics and TJR in particular still needs to be expanded and studied more thoroughly, namely at the implementation level.
- The benefits of PCC necessitates that the practice start sooner rather than later, and that governmental agencies, institutions, and various stakeholders invest in setting up dedicated centers to that end.

## INTRODUCTION

Over the last decade, the notion of patient-centered care (PCC) has been gaining considerable focus among the medical community.<sup>1</sup> Although this concept dates back to the 1960s to 1970s and was discussed by scholars, such as Balint and Lipkin,<sup>2,3</sup> the term itself was coined in 1988 by The Picker Institute.<sup>4,5</sup> Since then, the implementation of care-delivery models in alignment with PCC concepts has been studied in various medical specialties including pediatrics, cardiology, and rheumatology.<sup>6,7</sup> The impact of PCC on the health care system was significant, so much so that the Institute of Medicine (IOM) designated PCC as one of the six fundamental aims of the US health care system.<sup>8</sup>

Total joint replacement (TJR) is considered the definite treatment of end-stage arthritis associated with certain indications to include pain, functional limitations, and stiffness.<sup>9</sup> The procedure is considered one of the most efficient procedures in medicine because it leads to substantial improvement in quality of life.<sup>10</sup> The estimated cost of primary TJR in 2015 exceeded \$50 billion, and the rates are projected to increase in upcoming decades, especially with the increasing prevalence of the aging population.<sup>11</sup> With the current rise in health care expenditures, optimizing the quality and the economics associated with health care delivery has become a necessity. As such, the PCC model is perceived as a valid and

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sustainable approach that might lead to the crucially needed improvement in health care quality, while simultaneously decreasing associated costs.

This article highlights the practice of PCC in TJR by focusing on the major attributes of PCC models and providing a brief comment on PCC-based clinical care pathways in joint surgery.

## DEFINING PATIENT-CENTERED CARE

A large number of institutions and experts have attempted to define and characterize PCC. The IOM defines PCC as "Health care that establishes a partnership among practitioners, patients, and their families (when appropriate) to ensure that decisions respect patients' wants, needs, and preferences and that patients have the education and support they need to make decisions and participate in their own care."<sup>12</sup>

Along the same lines, the American Academy of Orthopedic Surgeons defines PCC as "the provision of safe, effective, and timely medical care achieved through cooperation among the physician, an informed and respected patient (and family), and a coordinated healthcare team."<sup>13</sup>

The Picker Institute, one of the leaders in the patient-centeredness field, defines PCC based on eight fundamental dimensions: (1) respect for patient-centered values, (2) coordination and integration of care, (3) information and communication, (4) physical comfort, (5) emotional support, (6) involvement of family and friends, (7) transition and continuity of care, and (8) access to care.<sup>14,15</sup>

Other definitions include that of the Planetree model health care, which "cultivate the healing of mind, body, and spirit; that are patient-centered, value-based, and holistic; and that integrate the best of Western scientific medicine with time-honored healing practices."<sup>15,16</sup> The Planetree model is based on nine integral attributes that significantly overlap with other institutions' definitions. Other characterizations include those of the Ontario Medical Association,<sup>17</sup> International Alliance of Patients' Organizations,<sup>18</sup> Institute for Family-Centered Care Model (family-centered care),<sup>19</sup> and many others.<sup>20</sup>

Even with this multitude of definitions and organizations associated with the conceptualization of PCC, the key attributes remain solid and constant throughout with substantial convergence. As such, it is evident that the insight on, definition of, and concept of PCC are widely established and available, whereas

the challenge at hand remains to design the optimal delivery system.

## THE BENEFITS OF PATIENT-CENTERED CARE

Multiple studies have highlighted the positive impact of PCC on improving health care delivery models and patient outcomes.<sup>21–30</sup> One of the main impacts of implementing PCC is the reduction of morbidity and mortality through targeting integral points in the treatment process, such as physician-patient relationship, communication, and active participation.<sup>21,22</sup> Furthermore, there is better overall compliance with the course of therapy, a reduction in the impact of symptoms on the quality of life, and improvement of health care efficiency by limiting the underuse and overuse of available resources.<sup>23–30</sup> Kim and colleagues,<sup>31</sup> in an interview of more than 500 patients, reported that patient-perceived physician empathy improved patient satisfaction and compliance. In another study, PCC was shown to improve objective outcomes in which patients with type 2 diabetes achieved better control of glucose levels.<sup>32</sup> Bertakis and Azari,<sup>33</sup> in a randomized trial of more than 500 participants, noted a 51% decrease in expenses for patients that were treated with a more extensive PCC approach. As such, PCC has been proven to improve patients' health status over a variety of value-metrics and variables, such as lessening discomfort along with better mental health, while simultaneously improving health care efficiency.<sup>21</sup>

## PATIENT-CENTERED CARE IN ORTHOPEDIC SURGERY

Orthopedic surgeons are advocating for PCC as a successful care-delivery model that focuses on the patient's needs, understanding, expectations, and preferences. The TJR literature still suffers from paucity in assessing and reporting patient satisfaction, choice of intervention, role of the patient in the decision-making process, and other integral parameters related to PCC. However, available research has shown that PCC positively impacts orthopedics and TJR patients, and additional efforts are currently underway to gain further knowledge.<sup>34–36</sup> Even though various protocols and guidelines exist for standardizing certain aspects of care in TJR (ie, deep vein thrombosis perioperative prophylaxis), limited guidelines are available to provide physicians and institutions with appropriate means to establish and implement PCC in TJR.<sup>37</sup>

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