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Patient Perceptions of the Direct Anterior Hip Arthroplasty

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ABSTRACT

Background: The quest for less invasive surgical approaches for total hip arthroplasty (THA) has garnered much attention recently in the community, as well as media outlets. There are very little data demonstrating the actual differences in these approaches. We are unaware of any information documenting patients' perceptions of the direct anterior approach (DAA) for THA. The purpose of this study was to collect information regarding patients' perceptions of the DAA THA.

Methods: We surveyed 166 consecutive new patients being evaluated for hip osteoarthritis in our outpatient clinic. Demographic data and their knowledge of the DAA were collected, as well as a number of questions on a 5-item Likert scale.

Results: Forty-six (28%) responded that they were aware of the DAA. Respondents primarily learned about the DAA from friends and family (58%), and healthcare professionals (38%). Respondents agreed or strongly agreed that the DAA is less painful (70%), reduces the amount of time spent on a cane after surgery (70%), damages tissues less (68%), allows patients to more quickly return to work (64%), and allows for shorter hospital stays (62%), compared to other procedures. In addition, 30% felt there is a consensus among surgeons that the DAA is the safest and most effective procedure for THA.

Conclusion: Many people are unaware of the DAA, with a majority of healthcare information being transmitted by friends and family members. The patients' perceptions are inconsistent with published data about the DAA and are likely influenced by marketing and individuals surrounding them.

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The direct anterior approach (DAA) is an increasingly popular surgical approach for total hip arthroplasty (THA) [1]. This rise in popularity is in part due to the DAA's reputation as less invasive than other surgical techniques for THA [2]. There is, however, limited evidence suggesting a marked difference in outcomes between the DAA and other surgical approaches [3–8]. In fact, some studies suggest that the DAA requires a long learning curve which may lead to increased rates of complication [2,9–13].

Many patients present to their surgeon with pre-established perceptions regarding the DAA. Anecdotally, these perceptions

bias patients toward favoring the DAA despite the fact that its superiority over other approaches is not supported by current peer-reviewed long-term literature. Moreover, the source of our patients' knowledge regarding the DAA is unknown. Currently, we are unaware of any literature reporting on patients' perceptions of the DAA, or if these perceptions bias patients toward favoring the DAA.

The goals of the study were to determine patient awareness of and perceptions about the DAA, and identify the sources of their knowledge.

Patients and Methods

After obtaining Institutional Review Board approval we surveyed a consecutive group of 166 new patients being seen for hip arthritis in our outpatient clinic. Patients were given the survey by our clinic intake staff. The patients independently completed the written survey prior to their initial consultation with a surgeon

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Patient Perspective of the Direct Anterior Hip Replacement Approach



Fig. 1. Cover page of survey.

(Fig. 1). The survey first asked patients if they were aware of the DAA. Patients aware of the DAA completed the entire survey (Figs. 2–5). Patients unaware of the DAA did not complete the remaining questions.

Those aware of the DAA indicated where they had heard of the DAA. They were prompted to mark all responses that applied, and were given a space to specify “other” sources of information regarding the DAA. The patients then answered 27 questions regarding their perceptions of the DAA. These questions were answered on a 5-item Likert-scale [14,15]: 1, Strongly disagree; 2, Somewhat disagree; 3, Neither agree nor disagree; 4, Somewhat agree; 5, Strongly agree.

Upon completion of the questions regarding their perceptions of the DAA, patients provided their highest level of education and whether or not they were employed in the healthcare profession. Additionally, patients consented to demographic data to be collected via their electronic medical record number.

Results

A total of 166 consecutive patients were given the survey. Forty-one patients (24%) responded that they had heard of the DAA. Of these 41 patients, the mean age was 67.8 years (range 55–79 years). Sixty-eight percent were female (25 of 41). Additionally, 19 (46%) resided in Minnesota. All those familiar with the DAA were high school graduates, with 13 (33%) completing some college, 9 (23%) graduating college, and 14 (35%) with some post-graduate education. Twenty-two percent (8 of 41) of the patients were employed in the healthcare profession.

Table 1 contains a summary of patients' perceptions of outcomes for the DAA in comparison with other surgical techniques for THA. A large number of patients agreed or strongly agreed that the DAA allows for less muscle damage ($n = 32$, 84%), less pain ($n = 27$,

71%), and shorter hospital stays ($n = 23$, 62%). Patients agreed that the DAA, more so than other approaches to THA, would allow them to return more quickly to the following: walking without a cane ($n = 26$, 70%), work ($n = 23$, 64%), driving automobiles ($n = 22$, 59%), running ($n = 16$, 45%), and sexual activity ($n = 12$, 34%). Furthermore, 11 patients (30%) agreed that the DAA is technically easier for the surgeon, and that there is a consensus among surgeons that the DAA approach is the safest and most effective approach to THA.

Most of the patients learned of the DAA from friends and family (58%), followed by healthcare professional (39%), and the internet (19%). The sources of patients' knowledge of the DAA are summarized in Table 2.

Discussion

The results from this survey indicate that a majority of patients (76%) seeking orthopedic consultation for hip arthritis are not familiar with the DAA. Of those familiar with the approach, most learned of the DAA from friends and family (58%), followed by healthcare professionals (39%), and the internet (19%). Additionally, we found that patients' perceptions of the DAA are inconsistent with published peer-reviewed literature.

Given the abundance of information about the DAA on the Internet, it is surprising that only 28% of patients in this study were aware of the DAA. A recent study documented that searching “direct anterior approach to total hip arthroplasty” in a Google yields over 118,000 results [16]. Yet only 19% of our participants heard of the DAA on the Internet. The high mean age of our survey participants (68 years) may suggest a lower level of computer literacy. This may account for the lower rates of awareness of the DAA seen in this cohort. Furthermore, we surveyed patients in our outpatient clinic being seen for hip

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