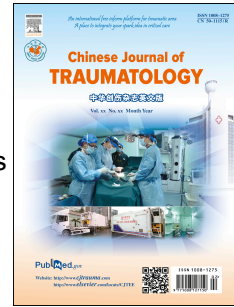


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Prognostic factors and predictive model for in-hospital mortality following hip fractures in the elderly

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Abstract

Purpose: The incidence of hip fractures is increasing within the aging population. Our objective was to identify and quantify the risk factors and develop a predictive model for the in-hospital mortality among hip fracture patients older than 65 years.

Methods: This is a prospective study conducted on 331 hip fracture patients older than 65 years admitted to our hospital from 2011 to 2014. Patients' demographics, prehospitalization residential status, prefracture comorbidity data, anti-aggregant and anticoagulant medication, preoperative hemoglobin value, type of fractures, type of treatments, time to surgery, and complications were recorded.

Results: The average age was 83 years, 73% female, and 57% of them sustained a femoral neck fracture. In 62.8% of patients, the number of pre-fracture baseline comorbidities was ≥ 2 . The in-hospital mortality rate was 11.4%. In multivariate analysis, age over 90 years, congestive heart failure, asthma, rheumatologic disease, lung cancer, and not taking antiaggregant medication were independently associated with in-hospital mortality.

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