

### 12 Best Papers

#### [O118] PATIENT-REPORTED QUALITY OF LIFE AND HIP FUNCTION AFTER REVISION OF TOTAL HIP ARTHROPLASTY DUE TO CHRONIC PERIPROSTHETIC JOINT INFECTION - AN ANALYSIS OF ONE-STAGE AND TWO-STAGE REVISION

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**Aim:** Very limited information is available regarding health-related quality of life (HRQOL) and patient reported hip function following treatment for chronic periprosthetic hip joint infection (PJI). Several reviews have not found any clear differences in clinical outcome parameters comparing the most commonly applied treatment strategies for chronic hip PJI. Studies describing patients HRQOL of one-stage and two-stage revision could provide important information regarding patient counselling. The purpose of this study was to investigate HRQOL and patient reported hip function after one-stage revision and two-stage revision in chronic hip PJI.

**Method:** The one-stage group was identified in a prospective clinical study on one-stage revision in chronic hip PJI. Fifty-one patients were followed for two years on an outpatient basis and completed three questionnaires; EuroQol-5D (EQ-5D), Short Form Health Survey 36 (SF-36) and Oxford Hip Score (OHS) at 3, 6, 12 and 24 months follow-up. The two-stage group was identified retrospectively in the National Patient Register and 45 patients completed EQ-5D and OHS. The observed results were compared to normative population data for SF-36 and EQ-5D.

**Results:** In the one-stage group the improvement in HRQOL appeared in the first 6 months after surgery, reached a plateau, and decreased slightly again. The largest improvements at 2 years were OHS with an effect size (ES): 1.3 and SF-36's physical role limitation and bodily pain with ES: 1.1. The one-stage group reached the matched population norm on all parameters at 12 months, but two scores declined from 12 to 24 months: physical functioning (66 to 50 (out of 100, population norm 71) and physical role limitation (58 to 40, population norm 63). Neither the one-stage nor the two-stage group reached the EQ-5D population norm. When comparing the two groups, the mean scores (CI 95%) for one-stage revision were significantly higher compared to the two-stage revision group on EQ-5D<sub>VAS</sub> 12.9 (2.4;23.3 p=0.02) and OHS 5.9 (0.5;11.2 p=0.03), but not on EQ-5D<sub>index</sub> 0.065 (-0.04;0.17 p= 0.22).

**Conclusions:** Two years after receiving one-stage revision the patients experienced a significant increase in HRQOL and reported hip function, and matched the population norm on most parameters. The decrease in physical scores at 24 months could be attributed to co-morbidities. Neither group reached the EQ-5D population norm. Patients receiving one-stage revision obtained higher HRQOL and hip function compared to two-stage revision. However, a direct comparison of the two groups cannot be performed due to difference in study design.