

노인재활

발표일시 및 장소 : 10 월 26 일(금) 15:25-15:35 Room C(5F)

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Predictive factors for independent ambulation after hip fracture surgery

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Objective

To investigate the predictive factors for independent ambulation in the elderly after hip fracture surgery.

Methods

Ninety-two patients aged 65 years and more who underwent fragility hip fracture surgery at three university hospitals from February 2017 to June 2018 were enrolled in the prospective clinical trial. Age, gender, KOVAL stage, Functional Ambulatory Category (FAC), modified Rivermead mobility index (MRMI), Berg balance scale (BBS), mini-mental state examination (MMSE-K), geriatric depression scale (GDS), EQ-5D, modified Barthel index (MBI), Korean instrumental activities of daily living (K-IADL), K-FRAIL, and hand grip strength (HGS) were evaluated. KOVAL 1 to 3 stage and FAC 4 to 5 score were classified as independent ambulation, whereas KOVAL 4 to 7 stage and FAC 0 to 3 score as dependent ambulation.

Results

Among 92 patients, 46 patients can walk independently 3 months after surgery. In univariate analysis, pre-fracture KOVAL stage or FAC score, MRMI, BBS, MBI, K-IADL, and HGS were significant parameters. In multivariate logistic regression analysis, low pre-fracture KOVAL stage (OR=2.228) and high pre-fracture FAC score (OR=3.351) revealed high probability for independent ambulation 3 months after surgery.

Conclusion

Ambulatory function assessed by KOVAL or FAC before fragility hip fracture may be the strongest predictive factor for independent ambulation after hip fracture surgery. A future study with larger sample size will be needed for definite conclusion.