Meget lavt niveau af fysisk aktivitet blandt en bred gruppe af patienter indlagt efter hoftebrud: Et prospektivt kohortestudie (HIP-ME-UP-kohortestudiet)

Maria Swennergren Hansen

Fysioterapeut, PhD, Post doc

Morten Tange Kristensen, Camilla Kampp Zilmer, Anja Løve Berger, Jeanette Wassar Kirk, Kira Marie Skibdal, Thomas Kallemose, Thomas Bandholm, Mette Merete Pedersen - **HIP-ME-UP Collaborative Group**

Amager og Hvidovre Hospital & Bispebjerg Frederiksberg Hospital

Physical Medicine & Rehabilitation Research – Copenhagen

Department of Physical- and Occupational Therapy
Department of Orthopedic Surgery
Department of Clinical Research

Amager og Hvidovre Hospital

HIP-ME-UP

Understanding and explaining clinical practice regarding basic mobility, physical activity and exercise in patients following a HIP fracture

Maria Swennergren Hansen

maria.swennergren.hansen@regionh.dk

Baggrund

Mand 72 år gammel

Vi ved, hvad vi skal gøre

Han tilbringer det meste af dagen i sengen

Kronborg L et al. Physical activity in the acute ward following hip fracture surgery is associated with less fear of falling. J Aging Phys Act 2016;24:525–32.

Davenport SJ, et al. Physical activity levels during acute inpatient admission after hip fracture are very low. Physiother Res Int 2015;20:174–81.

Fotos med tilladelse fra Jens

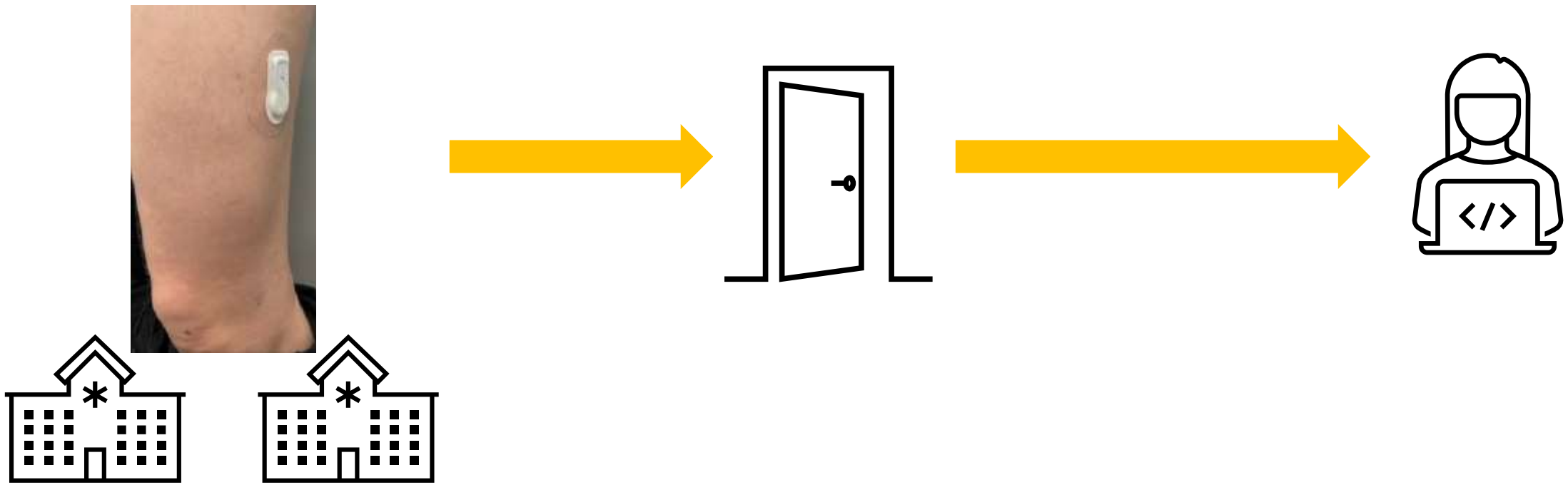
Formål

Nuværende niveau af fysisk aktivitet for Jens/patienter efter hoftebrud under akut indlæggelse?

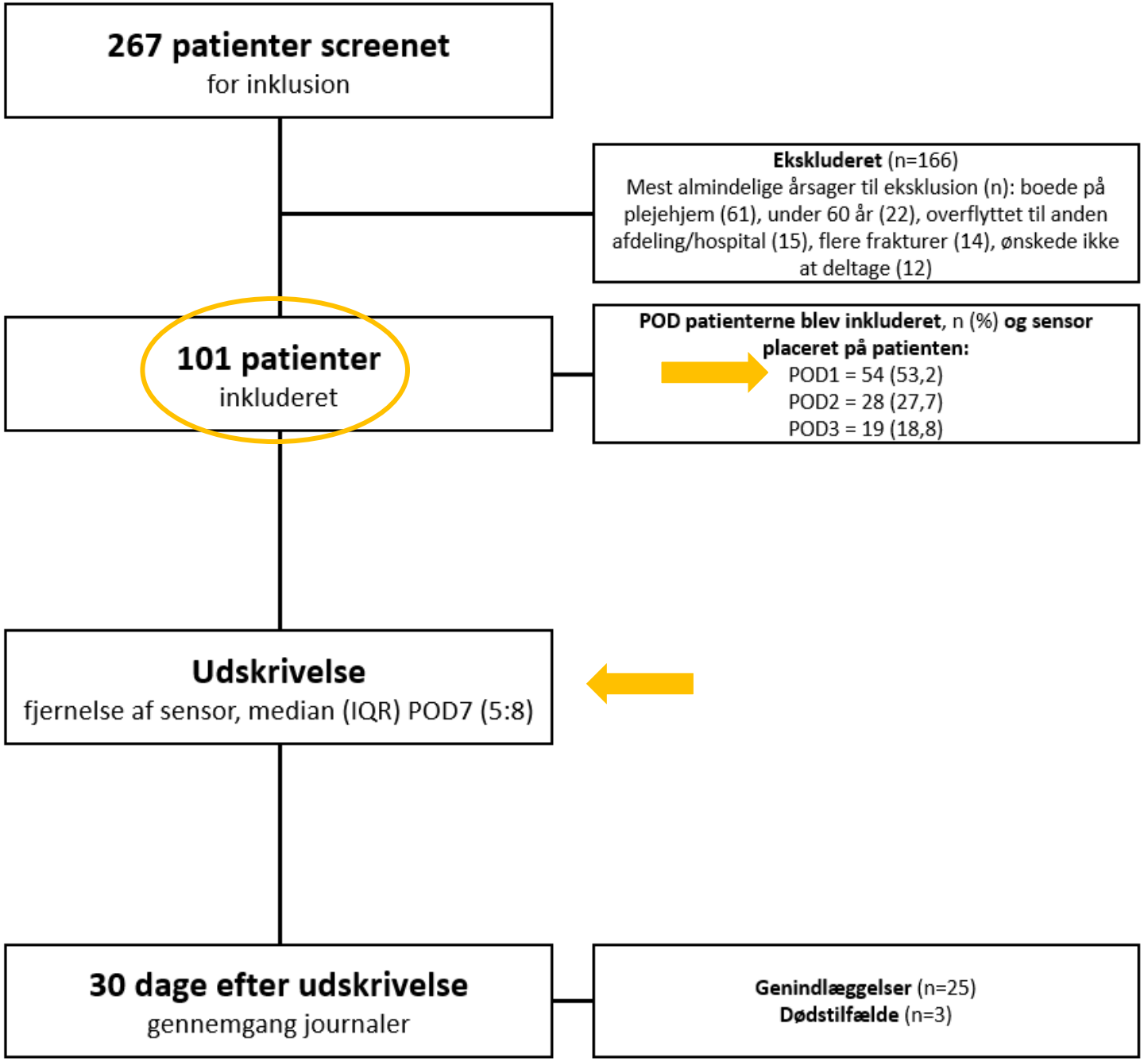
Kognitive svækkelser
Ikke taler dansk

Risiko for 30-dages genindlæggelse og dødelighed

Metode



Resultat


267 patienter screenet
for inklusion
Ekskluderet (n=166)
Mest almindelige årsager til eksklusion (n): boede på plejehjem (61), under 60 år (22), overflyttet til anden afdeling/hospital (15), flere frakturer (14), ønskede ikke at deltage (12)
101 patienter
inkluderet
POD patienterne blev inkluderet, n (%) og sensor placeret på patienten:
POD1 = 54 (53,2)
POD2 = 28 (27,7)
POD3 = 19 (18,8)
Udskrivelse
fjernelse af sensor, median (IQR) POD7 (5:8)
30 dage efter udskrivelse
gennemgang journaler
Genindlæggelser (n=25)
Dødstilfælde (n=3)

Resultat

	TOTAL (n=101)
Alder (år), mean (SD)	79.9 (8.4)
Kvinder, n (%)	62 (61.4)
Mænd, n (%)	39 (38.6)
Pre-fracture NMS (0-9), median (IQR)	9 (6:9)
Pre-fracture CAS (0-6), median (IQR)	6 (6:6)
OMC (0-28), median (IQR)	20 (15:25,3)
MNA, (0-14) median (IQR)	8 (6:10)
Ethnic background, n (%)	
Dansk	92 (91,1)
Fra et vestligt land	6 (5,9)
Fra et ikke vestligt land	3 (3)

Resultat

	TOTAL (n=101)
Alder (år), mean (SD)	79.9 (8.4)
Kvinder, n (%)	62 (61.4)
Mænd, n (%)	39 (38.6)
Præ-fraktur New Mobility Score (NMS) (0-9), median (IQR)	9 (6:9)
Præ-fraktur Cumulated Ambulation Score (CAS) (0-6), median (IQR)	6 (6:6)
Orientation-Memory-Concentration (0-28), median (IQR)	20 (15:25,3)
Mini Nutritional Assessment, (0-14) median (IQR)	8 (6:10)
Ethnic background, n (%)	
Dansk	92 (91,1)

Resultat

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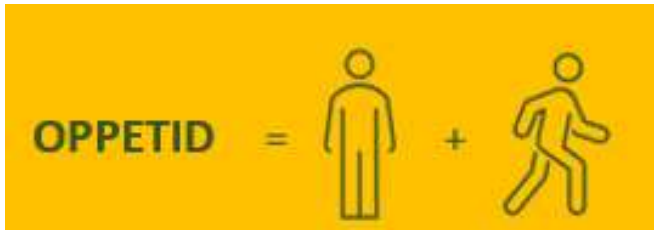
Mini Nutritional Assessment (MNA), (0-14) median (IQR)	8 (6:10)
Etnisk baggrund, n (%)	
Dansk	92 (91.1)
Fra et vestligt land	6 (5.9)
Fra et ikke-vestligt land	3 (3)

Aktivitet POD2-7

	POD2	POD3	POD4	POD5	POD6	POD7
N	47 (12.5%)	70 (18.6%)	81 (21.5%)	65 (17.2%)	48 (12.7%)	28 (7.4%)
Oppetid (min)	14 (6.7 : 30)	21 (9.9: 51)	24 (10: 45)	28 (17: 60)	33 (15: 65)	33 (15: 52)



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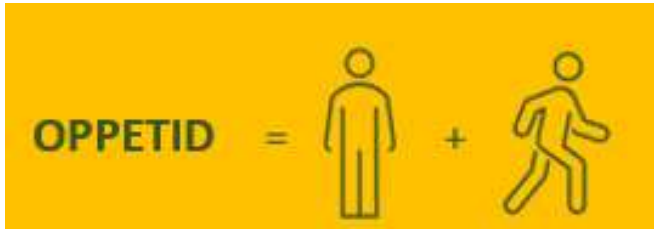

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Oppetid (min)	14 (6.7 : 30)	21 (9.9: 51)	24 (10: 45)	28 (17: 60)	33 (15: 65)	33 (15: 52)
Tid gående (min)	7.8 (3.4 : 21)	9 (4.7: 32)	11 (3.5: 31)	14 (5.3: 39)	18 (6.4: 40)	13 (3.3: 32)

Aktivitet POD2-7

	POD2	POD3	POD4	POD5	POD6	POD7
N	47 (12.5%)	70 (18.6%)	81 (21.5%)	65 (17.2%)	48 (12.7%)	28 (7.4%)
Oppetid (min)	14 (6.7 : 30)	21 (9.9: 51)	24 (10: 45)	28 (17: 60)	33 (15: 65)	33 (15: 52)
Tid gående (min)	7.8 (3.4 : 21)	9 (4.7: 32)	11 (3.5: 31)	14 (5.3: 39)	18 (6.4: 40)	13 (3.3: 32)

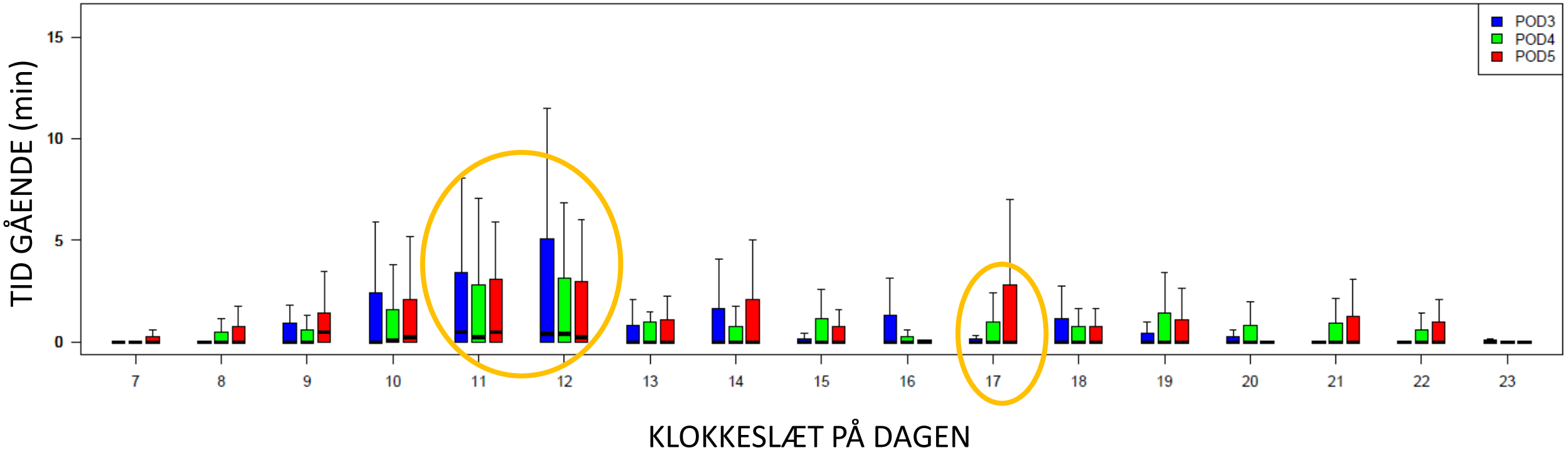
Kronborg et al. **(Hvidovre Hospital)** Data indsamlet 2012 37 patienter	42 min Oppetid
Taraldsen et al. Data indsamlet 2008-2010 317 patienter	52 min Oppetid

Patienter med kognitive svækkelser POD4

	OPPETID = +	TID GÅENDE
Patienter **med** kognitive svækkelser (n = 55)	23.9 min (IQR 9.9:52.3)	11.3 min (IQR 3.1:35.0)
Patienter uden kognitive svækkelser (n = 46)	37.8 min (IQR 14.7:78.3)	22.7 min (IQR 7.8:51.6)

Pedersen MM, Bodilsen AC, Petersen J, Beyer N, Andersen O, Lawson-Smith L, et al. Twenty-four-hour mobility during acute hospitalization in older medical patients. Journals Gerontol - Ser A Biol Sci Med Sci 2013;68:331–7

Tid gående døgnet igennem



Fysisk aktivitet var ikke forbundet med risiko for 30-dages genindlæggelse

DØDELIGHED

Denne population 3%

I Danmark 11.2%

GENINDLÆGGELSE

OR 0.99

CI 0.98-1.01, p=0.54).

Ingen sammenhæng mellem fysisk aktivitet og genindlæggelse

Perspektivering

Review

Exercise Therapy Is Effective at Improving Short- and Long-Term Mobility, Activities of Daily Living, and Balance in Older Patients Following Hip Fracture: A Systematic Review and Meta-Analysis

Signe Hulsbæk, MPH,[1,*] Carsten Juhl, PhD,[2,3] Alice Røpke, MScOT,[2] Thomas Bandholm, PhD,[1,5] and Morten Tange Kristensen, PhD[1,4]

Regaining pre-fracture basic mobility status after hip fracture and association with post-discharge mortality and readmission—a nationwide register study in Denmark

Morten Tange Kristensen[1], Buket Öztürk[2], Niels Dieter Röck[3], Annette Ingeman[2], He
Alma B. Pedersen[2]

HIP4Hips (High Intensity Physiotherapy for Hip fractures in the acute hospital setting): a randomised controlled trial

Lara A Kimmel[1,2], Susan M Liew[1,2], James M Sayer[1], Anne E Holland[1,3]

Systematic review

Optimal dose and type of physical activity to improve functional capacity and minimise adverse events in acutely hospitalised older adults: a systematic review with dose-response network meta-analysis of randomised controlled trials

Daniel Gallardo-Gómez,[1] Jesús del Pozo-Cruz ,[1] Hugo Pedder,[2]
Rosa M Alfonso-Rosa,[3] Francisco Álvarez-Barbosa,[1] Michael Noetel ,[4]
Unyime Jasper,[5] Sebastien Chastin ,[6,7] Javier Ramos-Munell ,[1]
Borja del Pozo Cruz [8,9]

CHRISTINE M. MCDONOUGH, PT, PhD • MARCIE HARRIS-HAYES, PT, DPT, MSCI
MORTEN TANGE KRISTENSEN, PT, PhD • JAN ARNHOLTZ OVERGAARD, PT, MSc • THOMAS B. HERRING, DPT
ANNE M. KENNY, MD • KATHLEEN KLINE MANGIONE, PT, PhD, FAPTA

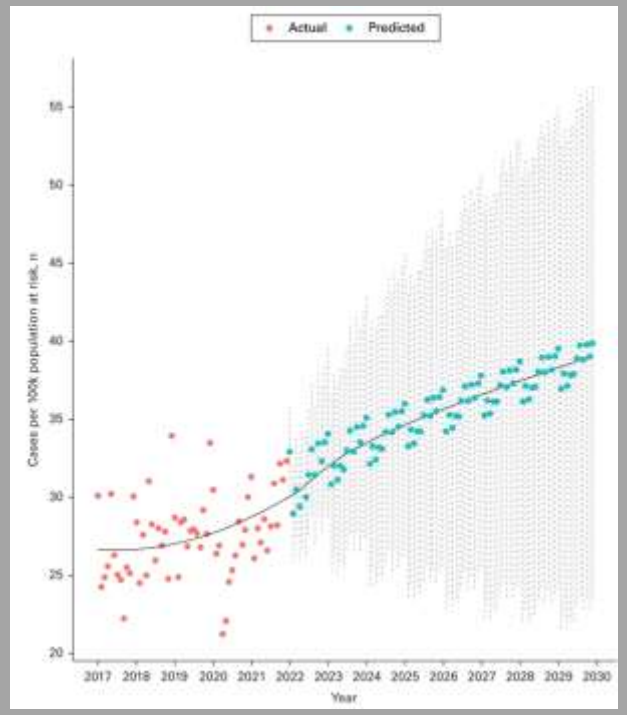
Physical Therapy Management of Older Adults With Hip Fracture

Negativ trend

FOKUS PÅ FYSISK AKTIVITET

NIVEAUER AF FYSISK AKTIVITET

Implikationer for klinisk praksis



Harris E, Clement N, MacLullich A, Farrow L. The impact of an ageing population on future increases in hip fracture burden: insights from the Scottish Hip Fracture Audit.

Kimmel la, liew sM, sayer JM, et al. hiP4hips (high inten-sity physiotherapy for hip fractures in the acute hospitalsetting): a randomised controlled trial.

Salvador-Marín J, Ferrández-Martínez FJ, lawton cD, et al.efficacy of a multidisciplinary care protocol for the treatmentof operated hip fracture patients.

Tak!

https://www.hvidovrehospital.dk/pmrc

maria.swennergren.hansen@regionh.dk

Maria Swennergren Hansen

Fysio- og Ergoterapien, Hvidovre Hospital








Bispebjerg og Frederiksberg Hospital

Amager og Hvidovre Hospital

Artikel her