

Joint replacement treatment: Using clinical pathways works

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Clinical pathways have been used in surgeries since the 1980s, but their nature and usefulness are still subjects of much debate, especially as procedures such as hip and knee joint replacement represent a significant cost to hospitals. Now authors publishing in the open access journal *BMC Medicine* have concluded that using clinical pathways can effectively improve the quality of the care provided to patients undergoing joint replacement.

A research team from the University of Eastern Piedmont, the Catholic University Leuven, the University Politecnica delle Marche and the Sainte Rita Hospital Trust searched four databases (Medline, Cinahl, Embase and the Cochrane Central Register of Controlled Trials) using relevant medical subject headings. The authors compared trials that contrasted the clinical pathways care with standard medical care whilst analysing at least one of the four possible clinical outcomes of postoperative complications, discharge to home, length of in-hospital stay (LOS) and direct costs.

The meta-analysis, covering 6,316 patients, showed that patients in the clinical pathways group had significantly lower levels of postoperative complications and significantly shorter hospital stays, which greatly contributed to lower hospital costs. The authors believe that these positive findings are a consequence of the care being better organised. Inappropriate care lengthens hospital stays and increases the risk of complications; clinical pathways have been shown to prevent inappropriate care and, thus, the cost to the [hospital](#).

This new data provides policy makers with the evidence they need to evaluate the place of clinical pathways in JR. According to the authors, "With the need for knee and hip joint replacement on the rise, the use of clinical pathways might contribute to better quality of care and cost-effectiveness."

More information: Effects of clinical pathways in the [joint replacement](#): a meta-analysis, A Barbieri, K Vanhaecht, P Van Herck, W Sermeus, F Faggiano, S Marchisio and M Panella, *BMC Medicine* (in press), www.biomedcentral.com/bmcmed/

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