

# Lack of evidence on how to care for hip fracture patients with dementia

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Hip fracture (right), Sjoehest, Creative Commons

Medical guidance on how to care for elderly people with dementia following a hip fracture is 'sadly lacking' according to researchers at the University of East Anglia.

Almost half of all people who suffer hip fractures also have [dementia](#). But a *Cochrane Review* published today reveals there is no conclusive evidence on how to care for this particularly vulnerable group.

The review, which was funded by the National Institute for Health Research (NIHR), highlights an urgent need for better research into what

strategies improve post-operative care - both within hospital settings and in the community.

Lead researcher Dr Chris Fox from UEA's Norwich Medical School said: "Hip fractures happen when [elderly people](#) have a fall. They account for 1.8 million bed days in UK hospitals and around £1.9 billion in hospital costs alone, excluding the high cost of social care which vulnerable patients, such as those living with dementia, need more of. Hospital costs are expected to rise to £2.2 billion by 2020.

"Hip fractures are very common in people with dementia. In fact more than 40 per cent of people with a [hip fracture](#) also have dementia - which equates to around 37,000 cases in the UK per year. This number is projected to rise to around 50,000 in five years.

"Unfortunately, outcomes are worse for this group of people, who find it more difficult to recover.

"People with dementia are particularly vulnerable when they have physical illnesses such as fractures. Their recovery is slower and they are more prone to complications. These patients are also associated with the greatest increase in care costs.

"The real problem is that NHS staff lack the evidence to provide the best care.

"Care for these people is more demanding on staffing levels and has an impact on costs of care with more than one in four NHS beds utilised in caring for people with dementia.

"With the ongoing rise in numbers of people with dementia, we have to make innovations in their clinical care to allow the best outcome and avoid wasting resources on interventions of no benefit.

"A hip fracture can affect a person's ability to walk, perform activities of daily living and remain independent. But when patients also have dementia, there is an increased risk of becoming more confused and developing additional complications such as pressure sores and chest infections after their operation. They may also find it more difficult to express pain and discomfort.

"We wanted to find out what sort of care options work best for this group of people - to find cases of 'best practice' that can be rolled out to ensure that [dementia patients](#) have the best possible chance to make a good recovery."

The team set out to assess the effectiveness of different types of care - including rehabilitation strategies that are designed specifically for people with dementia, compared to usual care.

Data was taken from five clinical trials involving 316 dementia patients who had suffered a hip fracture. The studies looked at how hospital inpatients are cared for, as well as how patients are cared for at home after discharge. Some patients were followed up for as long as two years after hospital discharge.

However the research team found the quality of available evidence in all of the studies to be 'very low'.

"We reviewed all the evidence that currently exists, but found it to be sadly lacking. For example, none of these trials told us anything about quality of life.

"What this tells us is that there is still a lot of uncertainty about how to care for a common comorbidity in elderly people.

"To care for this group of people, we need to know much more about

frequency and duration of physiotherapy, whether familiarised routines and assistive technologies help, and whether [patients](#) are better off in hospital, in a care home, or being cared for in their own home. We also need to know how factors such as age and stage of dementia affect the outcome of different management strategies."

**More information:** 'Enhanced rehabilitation and care models for adults with dementia following hip fracture surgery' is published on Monday, June 15, 2015.

Provided by University of East Anglia

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