

# Study finds racial disparities in hip replacement outcomes in impoverished communities

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A combination of race and socioeconomic factors play a role in hip replacement outcomes, according to a study at Hospital for Special Surgery (HSS). Researchers found that black patients who lived in areas of economic deprivation did worse in terms of physical function two years after surgery compared to white patients living in impoverished areas. In wealthier neighborhoods, there was no difference in hip replacement outcomes between blacks and whites.

The study was presented at the American College of Rheumatology/Association of Rheumatology Health Professionals annual meeting on November 5 in San Diego.

Using data from a large total [hip replacement](#) registry including more than 4,000 patients, researchers compared pain and function two years after surgery between blacks and whites. "To measure community deprivation, we used the census tract variable 'percent of the population with Medicaid insurance coverage,'" explained Susan Goodman, MD, a rheumatologist and director of the Integrative Rheumatology and Orthopedics Center of Excellence at HSS. "We found that [black patients](#) living in these areas did worse in terms of physical function than [white patients](#) in those neighborhoods."

Researchers evaluated pain and physical function using the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC), a

health status assessment tool. To assess physical function, it includes questions on walking, using stairs, rising from a chair, getting out of bed, putting on socks, shopping and other activities of daily living.

"Although we're unable to pinpoint a specific reason for the study findings, perhaps the message for doctors is to try to identify patients at risk of a less favorable outcome and provide them with extra support," Dr. Goodman said.

"Patients from impoverished areas also tend to have much worse pain and function at baseline, that is, when they first seek medical care," she added. "Community-based outreach and education may be helpful to ensure that they have access to appropriate care before their situation deteriorates further."

**More information:** Social Factors and Racial Disparities in Total Hip Arthroplasty Outcomes [abstract]. *Arthritis Rheumatol.* 2017; 69 (suppl 10).

Provided by Hospital for Special Surgery

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