

Preferred language other than English associated with delayed ACL surgery in children, teens

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Table 1. - Factors associated with surgery more than 60 days after injury (multivariable analysis)^a

Parameter	OR (95% CI)	p value
PLOE	2.2 (1.3-3.8)	0.005
Insurance type		
Public	4.2 (2.8-6.3)	< 0.001
Other	2.0 (0.8-4.8)	0.1

^aPrivate insurance was the reference group for insurance status.

Factors associated with surgery more than 60 days after injury (multivariable analysis). Credit: *Clinical Orthopaedics & Related Research* (2022). DOI: 10.1097/CORR.0000000000002359

Anterior cruciate ligament (ACL) injury, a type of knee injury that usually occurs during sports, is becoming more common among children and teenagers. When surgery is recommended for children and teenagers with an injury to the ACL, the operation should be done promptly. But

children and teenagers whose parents principally speak a language other than English are at doubled risk of delayed surgery, according to a study in *Clinical Orthopaedics and Related Research*.

ACL tears are painful, and left untreated, they can be debilitating. When surgery is called for—as usually is the case for young athletes—most surgeons believe it should be performed within a month or two of the injury. Longer delays may result in additional, irreparable knee damage.

Neeraj M. Patel, MD, MPH, MBS, an [orthopedic surgeon](#) who has a specialty in [sports medicine](#), and colleagues studied 543 children and teenagers who underwent ACL surgery at the Ann and Robert H. Lurie Children's Hospital in Chicago. The average patient age was 16, and boys and girls were represented equally. The authors compared surgical timing between 430 patients whose families spoke English at home with 113 whose preferred language was other than English (of those, more than 90% spoke Spanish in the home).

The researchers found that patients whose parents preferred a language other than English were twice as likely as patients from English-speaking families to undergo surgery more than 90 days after injury. This difference was observed even though the researchers accounted for the patients' type of insurance coverage.

Dr. Patel and his colleagues urge orthopedic surgery departments to provide more [equitable care](#) for children and teenagers whose parents prefer a language other than English. Some of the strategies they suggest include:

- Hiring more bilingual healthcare professionals,
- Arranging for better availability of interpreters,
- Providing easy access to health information translated into the languages used in the [local community](#),

- Partnering with schools, community organizations, and [primary care physicians](#) to increase understanding of ACL injuries and reduce delays to diagnosis and treatment, and
- Training healthcare teams how to verify that families understand the recommendations for treating the ACL injury and are actively involved in decision-making about whether to proceed with surgery.

"Institutions should foster a culture of care that is sensitive to and prepared for the needs of those whose preferred language is not English," the authors conclude. "This should involve inquiry and interaction with such families to better determine their specific barriers to care, biases they encounter, as well as their healthcare needs."

In a *CORR* Insights commentary accompanying the article, Kwadwo Adu Owusu-Akyaw, MD, a sports medicine specialist at OrthoVirginia in Richmond, VA, says, "Patel and his colleagues do a great job identifying the role of community partnership and patient education in their discussion of findings. Where we need to improve is identifying the specific barriers to care that affect individuals of specific communities with a shared lived experience."

More information: Samuel I. Rosenberg et al, Is Preferred Language Other Than English Associated With Delayed Surgery After ACL Injury in Children and Adolescents?, *Clinical Orthopaedics & Related Research* (2022). [DOI: 10.1097/CORR.0000000000002359](https://doi.org/10.1097/CORR.0000000000002359)

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