American Academy of Orthopaedic Surgeons updates guideline for managing hip fracture in seniors
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Julie Switzer, M.D., from the Orthopaedic Trauma Association in Rosemont, Illinois, and colleagues developed an updated guideline to be used by appropriately trained physicians and clinicians who manage hip fracture among older adults (ages 65 years and older).

The authors recommend against use of preoperative traction for patients with hip fracture. There may be an association between hip fracture surgery within 24 to 48 hours of admission and better outcomes. With respect to anesthesia, spinal or general anesthesia is appropriate for hip fracture patients. Arthroplasty is recommended over fixation for patients with unstable femoral neck fractures. The use of cemented femoral stems is recommended for patients undergoing arthroplasty for femoral neck fractures. To decrease complications and improve outcomes, interdisciplinary care programs should be used in the care of hip fracture patients.

"An interdisciplinary care program should begin the moment a patient is admitted to the hospital as it is an essential part of driving efficiencies to get a patient into the operating room within 24 to 48 hours," Switzer said in a statement. "Following surgery, this team, which can consist of geriatric, orthopedic, nursing, dietary, and rehabilitation providers, [is] the key to driving good outcomes and helping patients navigate this sentinel event."

More information: More Information

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