



Hip and knee surgery study aims to cut hospital waiting lists

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A new Australian study of 4000 hip and knee replacement operation patients could help cut public hospital waiting times for the procedures.

Patients who have undergone elective hip and knee replacement surgery at three Melbourne public hospitals over the last seven years will be studied to determine how key factors such as patient health and the type of anaesthesia and surgery, can lead to unplanned intensive care unit (ICU) admission.

The study is being led by Professor Philip Peyton, Director of Anaesthesia Research at Austin Health.

Professor Peyton said the ageing population was driving increased demand for hip and knee replacements and this was placing an increasing burden on the health system with lengthening waiting lists for surgery.

The Australian and New Zealand College of Anaesthetists (ANZCA) Research Foundation, through a collaboration with the Medibank Better Health Foundation, has provided \$50,000 for Professor Peyton and Dr Dominique Grant's study which will start early next year (2020).

"Despite improvements in orthopaedic surgery and anaesthesia, our ageing population has more health problems and these present a risk for surgical complications, with longer hospital stays and higher costs," Professor Peyton explained.

Professor Peyton said the aim of the study was to inform clinical practice and resource allocation for one of Australia's most common surgeries by identifying patients who are at risk of developing complications.

"By better identifying high risk patients requiring hip and knee replacement before their operations we can then help reduce waiting list times for others, reduce healthcare costs and minimise patient risk."

Professor Peyton, who chairs the ANZCA Clinical Trials Network, said the findings would then be used to develop a risk scoring tool to prevent unplanned admissions to intensive care units.

"High risk patients would be directed to centres with intensive care facilities for their surgery, reducing the potential need for emergency transfer between hospitals if doctors are concerned or complications arise after surgery," he said.