BROKEN BONES IN OLDER PEOPLE

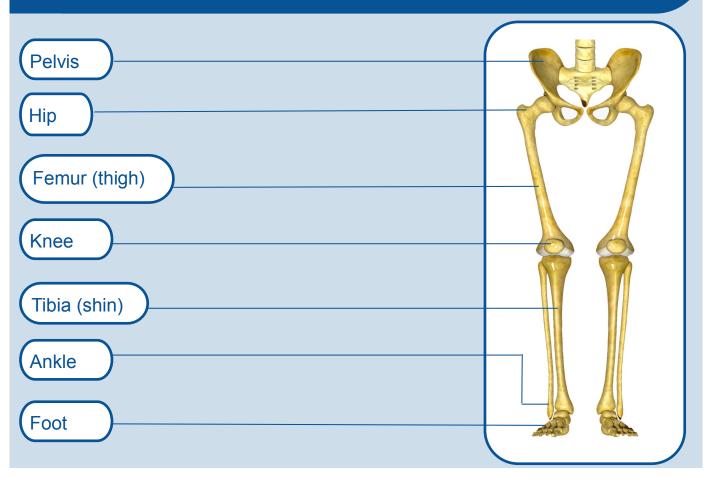


Musculoskeletal Injury: fragility fractures of the lower limb and pelvis

Tell us what you think are the big questions that should be answered by research?

Did you know?

- Approximately 500,000 people sustain a fragility fracture in the UK each year
- Osteoporosis leads to 9 million fractures annually worldwide
- Fragility fractures cost the NHS approximately £3 billion per year
- 70,000 people fall and break their hip in the UK every year
- 85% of fractures of the thigh bone around the knee (distal femur) are fragility fractures
- Ankle fractures in the over 60's are predicted to rise 3-fold by 2030



Who are we?

We are a group of patients, clinicians and researchers who are passionate about improving the care and quality of life of older patients who suffer a fragility fracture of the lower limb and pelvis. We are undertaking a James Lind Alliance Priority Setting Partnership to identify research priorities in fragility fractures of the lower limb and pelvis.

What is a fragility fracture of the lower limb and pelvis?

It is a break in one of the bones in the leg, anywhere from the pelvis to the feet, and usually occurs after a trip or a fall from standing. These fractures typically affect men and women over 60 years of age because as we get older our bones get weaker (fragility) and break more easily (fracture). These injuries can be very painful and seriously affect the patient's ability to move around and live independently.

Why do we need your help?

We are asking everyone involved - patients, their relatives, and healthcare professionals — to help us understand what is important in the care of fragility fractures. We want **your** views to guide research and for **you** to have a voice in shaping the

What will we do with your survey answers?

We will use your survey responses to take to the next stage of the process where the Top Ten research questions will be decided. We will then pass this on to the people who fund research so that your priorities drive the research.

Ultimately we want to provide answers to your most important questions.

What we are asking you to do...

We have grouped the questions into 11 themes all related to fragility fractures. The themes are pain, nutrition, surgery, medications, anaesthesia, rehabilitation, falls, anxiety & depression, diagnosis, information, and service delivery.

Each theme has a list of questions which were submitted by patients, carers, and healthcare professionals. For each question please assign an importance level from 'Not Important' to 'Extremely Important' based on how important each question is to you personally.

Contact us:

oxfordtrauma@ndorms.ox.ac.uk

YOU CAN COMPLETE THIS SURVEY ONLINE AT www.ndorms.ox.ac.uk/broken-bones-in-older-people

Or you can use this form — please continue on to the survey opposite.

By participating in this survey you give us, and partner organisations, permission to publish your answers when reporting on the Priority Setting Partnership, but the information you give will be anonymised (so your name will not be published and you will not be able to be identified from what you have told us).

THE SURVEY

Below each theme is a list of research questions relevant to that theme. For each research question please assign an importance level from 'Not important' to 'Extremely important'. Please work your way through the themes.

THEME: PAIN

This first theme is about pain associated with fragility fractures. The first question has 6 settings (listed below the question) where pain may be a problem. Please assign an importance level to each one.

What is the best pain relief, including non-drug therapies and alternatives to reduce morphine or opioid use, for adults with a lower limb fracture at the following stages of care?..

| | • | rival in hospital | •• | | |
|-----|-----------|----------------------|------------|------------------|---------------------|
| Not | important | Low importance | No opinion | High importance | Extremely important |
| • | On arriva | ıl in hospital (in t | the emerge | ncy department o | or ward) |
| Not | important | Low importance | No opinion | High importance | Extremely important |
| • | During a | naesthesia and i | mmediate r | ecovery after su | rgery |
| Not | important | Low importance | No opinion | High importance | Extremely important |
| • | During in | -hospital rehabi | litation | | |
| Not | important | Low importance | No opinion | High importance | Extremely important |
| • | Upon dis | charge from hos | spital | | |
| Not | important | Low importance | No opinion | High importance | Extremely important |
| • | For long | term pain more | than 6 mon | ths after injury | |
| Not | important | Low importance | No opinion | High importance | Extremely important |

Theme PAIN continued...

| | ul movements of | • | such as a splint of transfo | or similar device to er adults with a |
|-------------------------------|---|---------------|--------------------------------------|--|
| Not important | Low importance | No opinion | High importance | Extremely important |
| | ther short term | • | n adults with an such as demen | |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | Т | HEME: NUT | RITION | |
| | bout nutrition in t e question) wher | | • | stion has 3 settings |
| | or adults with a f | | s (such as vitan he lower limb at | · • |
| | | | ery after surger | |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | Ш | | Ш | Ш |
| | ı-hospital rehabi | | | |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | | |
| For long- | term supplemer | ntation after | discharge from | hospital |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | | |
| | | | ional needs and the lower limb? | guide supplemen- |
| Not important | Low importance | No opinion | High importance | Extremely important |

Please continue to the next page for the next theme.

THEME: SURGERY

What is the role of non-surgical treatment (allowing the bone to heal

This theme is about surgery and fragility fractures.

| naturally without surgery) in some adults with a hip fracture? | |
|--|---|
| Not important Low importance No opinion High importance Extremely important | t |
| | |
| How effective is a partial hip replacement compared with total hip replacement in adults undergoing treatment for a hip fracture? | |
| Not important Low importance No opinion High importance Extremely important | t |
| How effective and safe is a modern cemented partial hip replacement compared with a modern cementless replacement in adults undergoing surgery for a hip fracture? | |
| Not important Low importance No opinion High importance Extremely important | t |
| Does the position of the surgical incisions to skin and muscles (the surgical approach) affect outcomes in adults undergoing surgery for a hip fracture? | |
| Not important Low importance No opinion High importance Extremely important | t |
| What is the best surgical treatment for unstable hip fractures outside of the hip capsule (trochanteric) in adults? | |
| Not important Low importance No opinion High importance Extremely important | t |
| Does the length of time it takes to complete surgery affect the outcomes following hip fracture surgery? | |
| Not important Low importance No opinion High importance Extremely important | t |

Theme SURGERY continued...

| | ffect of the surge ery in adults? | eon's exper | ience on the out | come of hip |
|--------------------------------|---------------------------------------|---------------|-------------------|----------------------|
| Not important | Low importance | No opinion | High importance | Extremely important |
| How effective fractures of the | e is surgery com he pelvis? | pared with ı | non-surgical trea | atment for |
| Not important | Low importance | No opinion | High importance | Extremely important |
| What is the b | est surgery for f | ractures ard | ound the hip soc | ket (acetabulum)? |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | ffectiveness of route | • | • | using cement or |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | est surgical trea ose to the knee) | | actures of the di | stal femur (the |
| Not important | Low importance | No opinion | High importance | Extremely important |
| What is the b | est treatment fo | fragility fra | ctures of the kn | ee-cap (patella)? |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | est treatment forms | • | | ial plateau (the top |
| Not important | Low importance | No opinion | High importance | Extremely important |

Theme SURGERY continued...

What would be the effect of setting national treatment targets (such as

waiting time to surgery) which each hospital has to meet for all fractures of the lower limb? Not important Low importance No opinion High importance Extremely important What is the best surgical treatment for fragility fractures of the ankle? Not important Low importance No opinion High importance Extremely important What is the best treatment for fractures of the foot and ankle where surgery would not be effective? Not important Low importance No opinion High importance Extremely important What is the best treatment for fractures of the joint between the tibia and fibula at the bottom of the shin (syndesmotic injuries) in adults with a fracture of the ankle? Not important Low importance No opinion High importance Extremely important What is the best way to promote healing in adults with a fracture of the lower limb? Not important Low importance No opinion High importance Extremely important What is the best method of pin site care in adults undergoing treatment with an external metal frame for a fracture of the lower limb? Not important Low importance No opinion High importance Extremely important

Theme SURGERY continued...

What is the best treatment for fractures around existing implants (periprosthetic fractures)? Not important Low importance No opinion High importance Extremely important What is the best wound dressing (including no dressing) for lower limb fractures? Not important Low importance No opinion High importance Extremely important What is the best way to prevent surgical site infection in adults undergoing surgery for fractures of the lower limb? Not important Low importance No opinion High importance Extremely important What is the best antibiotic/s to prevent surgical site infection in adults undergoing surgery for fractures of the lower limb? Not important Low importance No opinion High importance Extremely important What is the best treatment for surgical infections in adults following surgery for fractures of the lower limb? Not important Low importance No opinion High importance Extremely important

Please continue to the next page for the next theme.

THEME: MEDICATION / DEVICES

This theme is about medication / devices and fragility fractures. The first question has 2 settings (listed below the question). Please tell us how important they are to you.

What is the best way to reduce harmful blood clots within the following situations:

| In adults v | with a hip fractu | re? | | |
|---------------------------------------|---|---------------|-------------------------------------|-------------------------------------|
| Not important | Low importance | No opinion | High importance | Extremely important |
| In adults the limb? | reated with a pla | aster cast (d | or splint) for frac | tures of the lower |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | l guidelines aime dults with a hip f | | ng harmful bloo | d clots been |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | take medications and increased b | s to thin the blood, blood loss? |
| Not important | Low importance | No opinion | High importance | Extremely important |
| medication ha | | mes compa | effects of bone pared with adults a | |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | ffectiveness of bullts with a fractu | - | tion medication i wer limb? | n promoting |
| Not important | Low importance | No opinion | High importance | Extremely important |

Theme MEDICATION / DEVICES continued...

Does the use of medication to treat anxiety and depression (e.g. antidepres-

sants) slow healing time in adults following a fracture of the lower limb? Not important Low importance No opinion High importance Extremely important THEME: ANAESTHESIA This theme is about anaesthesia and fragility fractures. What is the effect of general anaesthetic (being asleep during surgery) compared with epidural or local anaesthetic (regional anaesthesia) on early postoperative outcomes and recovery of patients with a lower limb fracture? Not important Low importance No opinion High importance Extremely important What are the best treatments to prevent and treat confusion and delirium after surgery in adults with a lower limb fracture? Not important Low importance No opinion High importance Extremely important What are the consequences of worsening confusion after surgery in patients sustaining a fracture of the lower limb? Not important Low importance No opinion High importance Extremely important What is the best way to prevent a low blood count after surgery in adults with a lower limb fracture? Not important Low importance No opinion High importance Extremely important

Please continue to the next page for the next theme.

THEME: REHABILITATION

This theme is about rehabilitation and fragility fractures. The first two questions have a number of settings (listed below the questions). Please tell us how important they are to you.

What is the best weight bearing regime following treatment (with or without surgery) in the following situations:

| For fract | ures of the ankle | ? | | |
|-------------------------------|--|---------------|------------------|---------------------|
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | | |
| For fract | ures of the pelvi | s and acetak | oulum (hip socke | et)? |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | ures of the tibial ne knee joint)? | plateau (the | top of the shin | bone which forms |
| Not important | Low importance | No opinion | High importance | Extremely important |
| adults in the | est physiothera following situati eir in-hospital re | ons: | • | ., |
| Not important | Low importance | No opinion | High importance | Extremely important |
| During o | ut-of-hospital re | covery from | a lower limb fra | cture? |
| Not important | Low importance | No opinion | High importance | Extremely important |
| rehabilitation | improve the way n when patients espital to home) | transition fr | om one environr | nent to another |
| Not important | Low importance | No opinion | High importance | Extremely important |

Theme REHABILITATION continued...

| | • | | a fracture of the | |
|--------------------------|---------------------------------------|---------------|--|--------------------------------|
| Not important | Low importance | No opinion | High importance | Extremely important |
| | est intervention/ om hospital with | | • • | ort early discharge |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | iced recovery pa ure of the lower | • ` |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | support needs o | of the family | and carers of ac | dults recovering |
| Not important | Low importance | No opinion | High importance | Extremely important |
| What is most lower limb? | important to ad | ults in their | recovery from a | fracture of the |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | ement monitors, nes of adults wit | |
| Not important | Low importance | No opinion | High importance | Extremely important |
| - | nd healthcare pr | - | rtant aspects of nt of view) in the | care, (from both recovery of a |
| Not important | Low importance | No opinion | High importance | Extremely important |

Please continue to the next page for the next theme

THEME: FALLS

This theme is about falls and fragility fractures.

| What are the bes after a lower limb | | rapies to tr | eat adults with a | fear of falling |
|--|-----------------|--------------|--------------------|----------------------------------|
| Not important Lov | w importance | No opinion | High importance | Extremely important |
| What are the bes falling after a low | | - | s to treat adults | with a fear of |
| Not important Lov | v importance I | No opinion | High importance | Extremely important |
| Which patients a the lower limb? | re more likely | to develop | a fear of falling | after a fracture of |
| Not important Lov | w importance | No opinion | High importance | Extremely important |
| This theme is about | ut anxiety & de | epression re | | |
| Not important Lov | | | | Extremely important |
| What are the best community supposed depression follows: | ort services) | to treat adı | ults at risk of an | • |
| Not important Lov | w importance | No opinion | High importance | Extremely important |
| What is the best of developing an | | | • | edict those at risk mb fracture? |
| Not important Lov | w importance | No opinion | High importance | Extremely important |

Please continue to the next page for the next theme

THEME: DIAGNOSIS

This theme is about diagnosis of fragility fractures. How often is diagnosis of a fracture delayed and how can this be improved? Not important Low importance No opinion High importance Extremely important What is the effectiveness of tools used to diagnose a lower limb fracture in adults before arriving in hospital? Not important Low importance No opinion High importance Extremely important THEME: INFORMATION This theme is about the provisions of information related to fragility fractures. What information about recovery (e.g. rehabilitation, medication, exercises, nutrition, pain), and in what form, should be provided to patients and carers following a fracture of the lower limb? Not important Low importance No opinion High importance Extremely important THEME: SERVICE DELIVERY This theme is about the way we deliver services associated with fragility fractures. How effective are virtual clinics (via telephone or other means) compared with conventional face-to-face clinics in adults with fractures of the lower limb? Not important Low importance No opinion High importance Extremely important How effective are specialist trauma wards for older people compared to current care for adults with a fracture of the lower limb?

Not important Low importance No opinion High importance Extremely important

Theme SERVICE DELIVERY continued...

| | • | - | discharge (facto | ors which delay or e of the lower |
|---------------|---|--------------|----------------------------------|--------------------------------------|
| Not important | Low importance | No opinion | High importance | Extremely important |
| | ment in research adults with frac | | al trials improve of lower limb? | care and |
| Not important | Low importance | No opinion | High importance | Extremely important |
| _ | ographical variat e of the lower lir | - | uality of care pro | ovided for adults |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | patients and caps) following a f | - | pported (e.g. pation | ent networks, |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | npact of open vi e lower limb? | siting times | s in hospitalised | adults with a |
| Not important | Low importance | No opinion | High importance | Extremely important |
| | | | | |

THANK YOU for completing this survey

Please continue to the next page to tell us a little bit about yourself.

ABOUT YOU — optional

The final part will ask a little bit about you so that we can ensure we have collected the views from a wide range of people with various experiences. Your personal information will be stored securely and separately from your survey answers.

| Please tick one box which best describes you below. |
|--|
| I have previously had a fragility fracture when aged 60 years or older I know someone who has had a fragility fracture I am, or have been, a carer for someone with a fragility fracture I am a healthcare professional treating people with these fractures If so, what is your role? |
| Are you: |
| Male Female Other Prefer not to say |
| What is your age? |
| Under 20 20-29 30-49 50-69 70-79 80+ Prefer not to say |
| What is your ethnic group? |
| White Asian Asian British Black/African/Caribbean/Black British |
| Arab Mixed/multiple ethnic groups Prefer not to say |
| Other ethnic groups (Please describe) |
| What is your post code, (first 3 or 4 characters only): |
| THANK YOU for completing this survey. |
| Please return your completed survey to a staff member. |
| KEEP IN TOUCH |
| Would you like to hear the outcome of the Top 10 priorities? Are you interested in attending the final workshop on the 25th January 2018 where the Top 10 research priorities will be decided (limited spaces available)? |
| If so please provide your name and either your postal address or an email |
| so that we can contact you. |
| NAME: |
| EMAIL: |
| ADDRESS: |