



Rehabilitation after Hip Fracture Surgery in Dementia and Cognitively Intact Patients

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Abstract:

Introduction. The combined presentation of dementia and hip fracture in the elderly is emerging as a significant health issue worldwide. An individual with dementia is up to 3 times more likely than a cognitively intact older adult to sustain a hip fracture.

Objectives. 10 participants were recruited, 7 were women and 3 were cognitively impaired. Mean age was 80 years. All hip fractures are treated with surgery. This study analyzes recovery, incidence of delirium and 30-day mortality, after hip surgery.

Results and discussion. Patients with dementia make poor functional recoveries after hip fracture as compared to nondemented patients. Individuals with dementia use rehabilitation less after hip fracture surgery. Early operative intervention is important to patients because it results in less pain, which in turn leads to lower incidence of delirium. Patients with dementia experience higher rates of all-round morbidity and mortality following hip fracture.

Conclusion. The goal of acute-care hospital treatment of patients with hip fractures including those with dementia is to achieve the following outcomes: short time to surgery, few or no complications, control of pain, and early mobilization for restoration of function and gait. Following a hip fracture, patients with dementia are at higher risk of mortality and functional decline than those who are cognitively intact.

Keywords

Hip Fractures, Dementia, Postfracture Hip Rehabilitation