

CURRENT REHABILITATION STRATEGIES FOLLOWING HIP ARTHROSCOPY IN SCANDINAVIA - A SURVEY OF PHYSIOTHERAPISTS AND SURGEONS IN DENMARK, NORWAY, AND SWEDEN

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CURRENT REHABILITATION STRATEGIES FOLLOWING HIP ARTHROSCOPY IN SCANDINAVIA – A SURVEY OF PHYSIOTHERAPISTS AND SURGEONS IN DENMARK, NORWAY, AND SWEDEN

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Background

The worldwide number of hip arthroscopies (HA) is increasing dramatically, and is expected to keep on rising. Hence, increasing amounts of patients require post-surgical rehabilitation. Evidence is however lacking regarding post-operative rehabilitation.

Aim

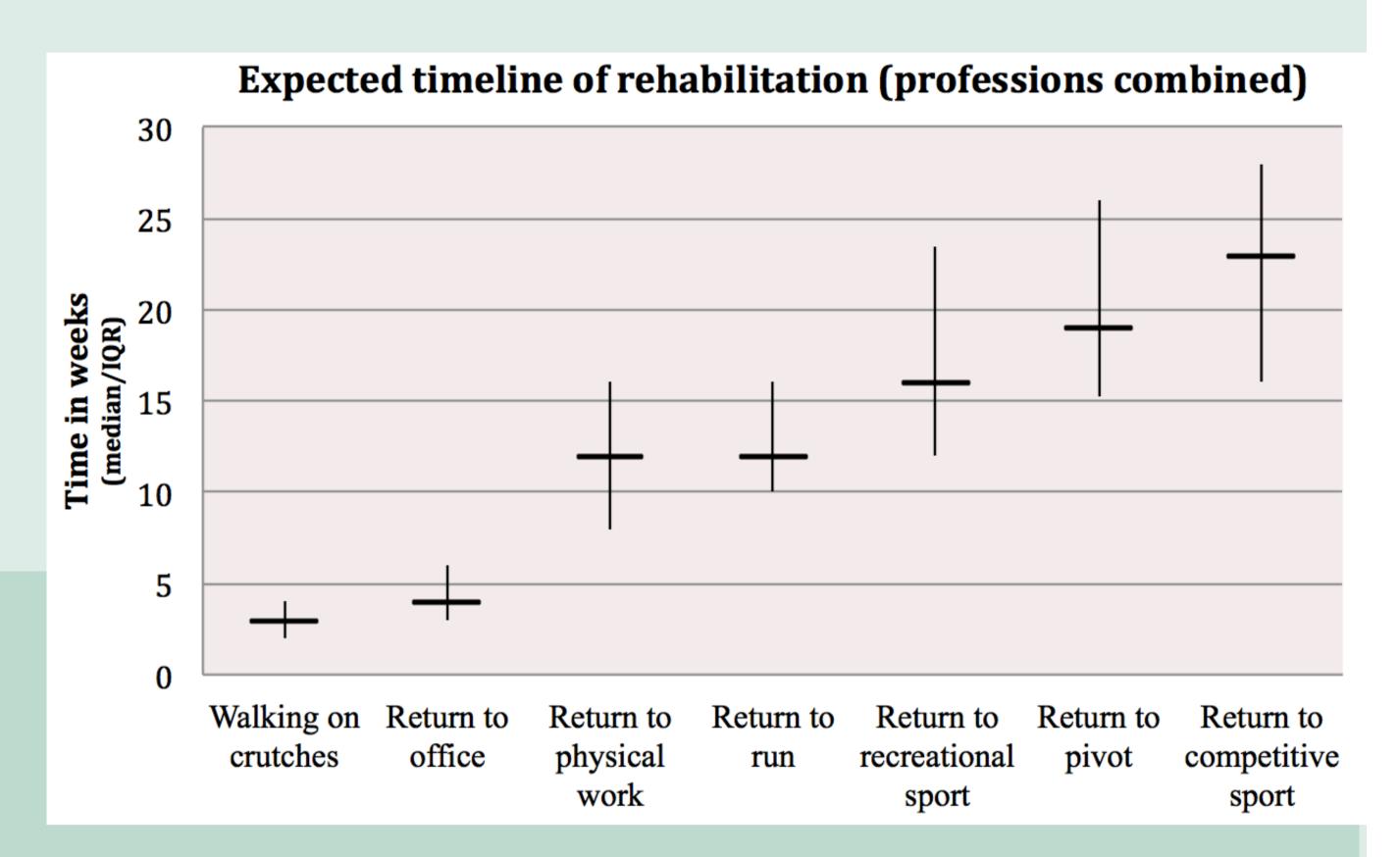
To provide an overview of the rehabilitation process following HA in Scandinavia through a description of current rehabilitation strategies and views among physiotherapists and surgeons providing specialized care within this field. Furthermore, potential differences in perspectives between professions were explored.

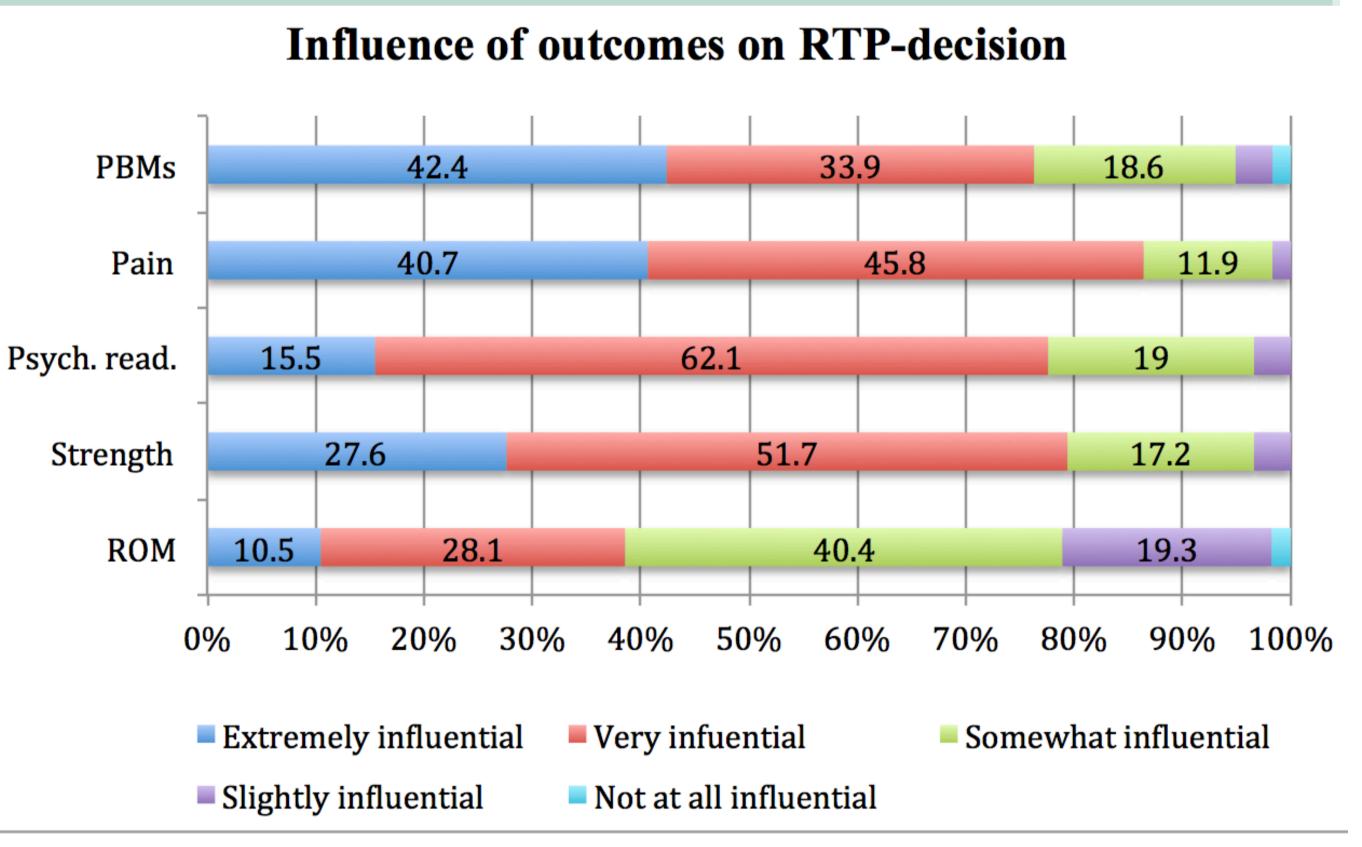
Material & Methods

Scandinavian (Danish, Norwegian, Swedish) physiotherapists and surgeons, experienced with HA and post-surgical rehabilitation, were invited to participate in a web-based questionnaire survey. Ninety clinicians (62 physiotherapists & 28 surgeons) responded.

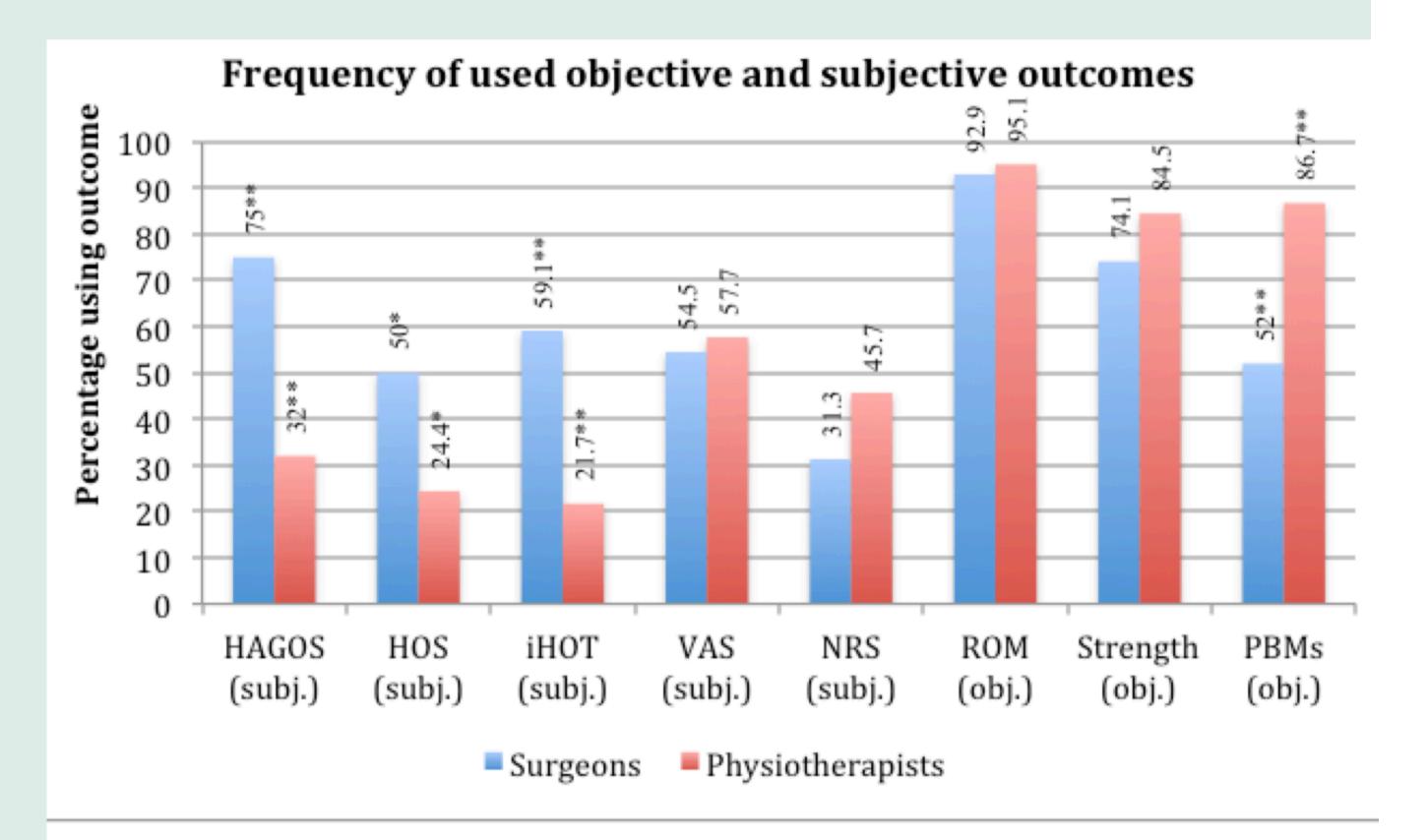
Results

Physiotherapy was rated as very or extremely important in the rehabilitation following HA (physiotherapists: 92%, surgeons: 82%; p=0.275). Either criteria-based or combined criteria- and time-based rehabilitation progression is advocated by 87% of physiotherapists and 78% of surgeons (p=0.349). Expected rehabilitation-timelines were reported with large within-group variation but with general inter-professional agreement. However, surgeons expected fewer weeks on crutches [(Median (IQR): 2 (2-3), physiotherapists: 4 (2-4); p=0.022] and to return to competitive sports [(Median (IQR): 12 (12-20), physiotherapists: 18 (12-24); p=0.011]. Physiotherapists more often evaluate readiness to return to play (physiotherapists: 74%, surgeons: 50%; p=0.024).





PBMs=Performance based measures; Psych. read.=psychological readiness; ROM=Range of motion; Percentages (%) are displayed when exceeding 10% of responses



HAGOS=Copenhagen Hip and Groin Outcome Score; HOS=Hip Outcome Score; iHOT=International Hip Outcome Tool; VAS=Visual analogue scale; NRS=Numeric rating scale; ROM=range of motion; PBMs=Performance-based measures; subj.=subjective; obj.=objective; * = p-value ≤ 0.05; ** = p-value ≤ 0.01

Conclusion

- Physiotherapy is considered very important after hip-arthroscopy among both surgeons and physiotherapists.
- Either criteria-based or combined criteria and time-based progression is advocated.
- Surgeons and physiotherapists generally reported similar views on the rehabilitation process.
- Surgeons expected shorter time than physiotherapists on crutches and to return to competitive sports.
- Physiotherapists used evidence-based self-reported outcome measures to a lesser degree than surgeons.