Health-Related Quality of Life: Comparison following Fusion for Lumbar Degenerative Spondylolisthesis with Hip & Knee Joint Replacement Surgery & with Population norms

William Sears*, Peter McCombe⁺, Owen Williamson⁺, & Gavin White^{*}

Macquarie University Sydney*, Royal Brisbane Hospital†, Monash University[‡], Medtronic[‡]
Australia

NASS
Toronto, October 15th 2008

Acknowledgements:

- Dr Robert Bourne, London Health Sciences, University of Western Ontario
- Mr Jeff Guerin, Orthotech

Disclosures:

Author - W.S.

» Royalties: Medtronic (Major)

» Consulting fees: Medtronic (Major)

» Speaking arrangements: Medtronic (Minor)

» Research support: Medtronic (Major)

» Trips/travel: Medtronic (Major)

Author - P.McC.

» Royalties: Medtronic (Major)

» Consulting fees: Medtronic (Major)

» Speaking arrangements: Medtronic (Minor)

» Research support: Medtronic (Minor)

» Trips/travel: Medtronic (Major)

Author – O.W.Nil

Author – G.W.

» Employee: Medtronic (Major)

"Never let anyone touch your back"

- Certain surgical procedures are well regarded:
 - in the community
 - by health regulators
- Comparisons to other surgeries:
 - Rampersuad YR et al. NASS 2007 Best Paper
 - Polly DW et al. Spine 2007

Objectives

- 1. Measure the Quality of Life of patients (HRQL):
 - common & specific spinal disorder,
 - specific decompression and fusion technique,
 - generic measurement instrument
- 2. Compare these HRQL measurements with:
 - hip or knee surgery
 - total joint arthroplasty,
 - population norms
 - published, age-matched.

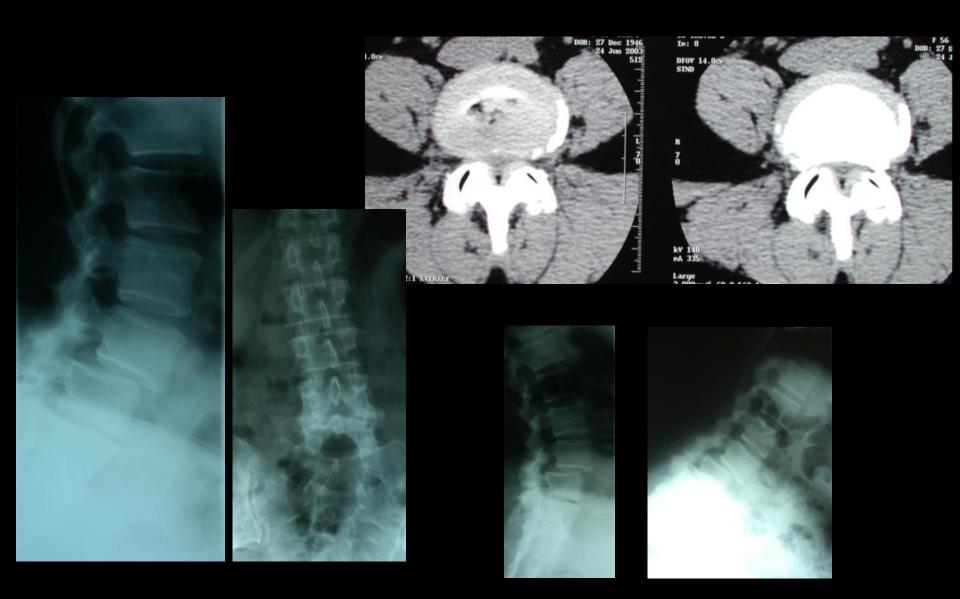
Study design:

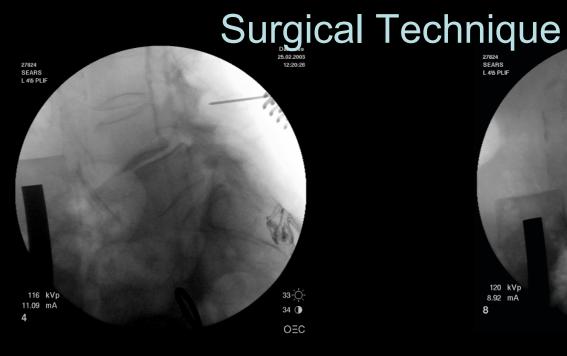
- Prospective
 - Consecutive case series
 - 2 independent surgeons
- Comparison with published literature (Hips, Knees, Norms)

Inclusion Criteria:

- Clinical:
 - neurogenic claudication
 - no previous surgery
 - failed conservative management
- Radiological:
 - single level, lumbar spinal stenosis
 - 'unstable' degenerative spondylolisthesis

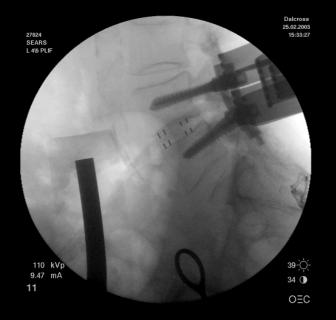
Female 56 yrs















Data Collection:

- Baseline demographics
- _(SF-12
 - Physical Component Summary score (PCS-12)
 - Mental Component Summary score (MCS-12)
- Follow-up:
 - 3, 6, 12, 24 months & last known (minimum 12 months)

SF12

- Generic HRQoL measure
 - Physical (PCS-12) & Mental (MCS-12) components
 - Allows comparison of health status of different conditions
- A 5 point or greater score change is clinically important*

^{*} Bozic KJ et al. *J Bone Joint Surg Am 2003* Copay AG et al. *Spine J, In press*

- Data Collection:
 - SF-12
 - Physical Component Summary score (PCS-12)
 - Mental Component Summary score (MCS-12)
 - Follow-up:
 - 3, 6, 12, 24 months & last known (minimum 12 months)
- Systematic literature review:
 - 1950 to March 2008
 - MeSH terms:
 - "Arthroplasty, Replacement, Hip" or "Arthroplasty, Replacement, Knee"
 - Keyword: "SF-12".
 - Means and 95% Cl's
- Population Norms:
 - South Australian, Avery et al, 2004.
 - Age-matched (IQR)

- Data analysis:
 - Descriptive statistics: means and 95%Cl's
 - Participant demographics
 - Pre-, post-operative & change PCS-12 and MCS-12 scores.
 - Wilcoxon signed-rank test:
 - Comparison of pre- and post-operative scores.
 - Group comparisons
 - Overlapping 95% Cls
 - T test (unequal numbers, unequal variance assumed)
 - XLSTAT version 7.5.3 software

Results Baseline demographics

	Spine	Hip	Knee	Population norms
Studies		2	3	1
Number	98	276	791	455
Females (%)	73*	44	59	51
Age (mean, range)	67 (46-90)	62 (22-89)	69 (29-83)	55-74
Pre-op PCS-12 (mean, 95%CI)	28 (27-30)	30 (28-31)	30 (29-31)	44 (42-45)
Pre-op MCS-12 (mean, 95%CI)	48 (46-50)	47 (46-49)	53 (52-54)	54 (53-54)

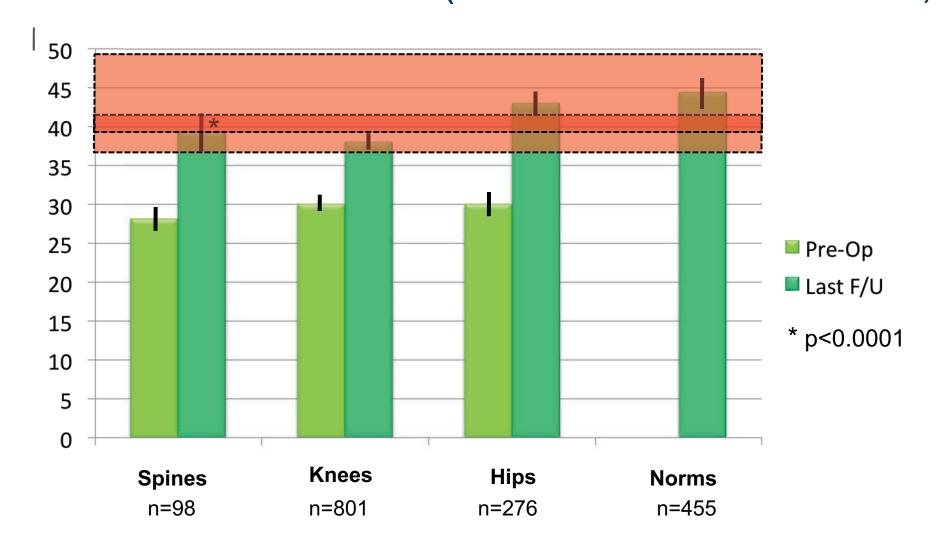
^{*} p<0.001 compared with all other groups

Results Baseline demographics

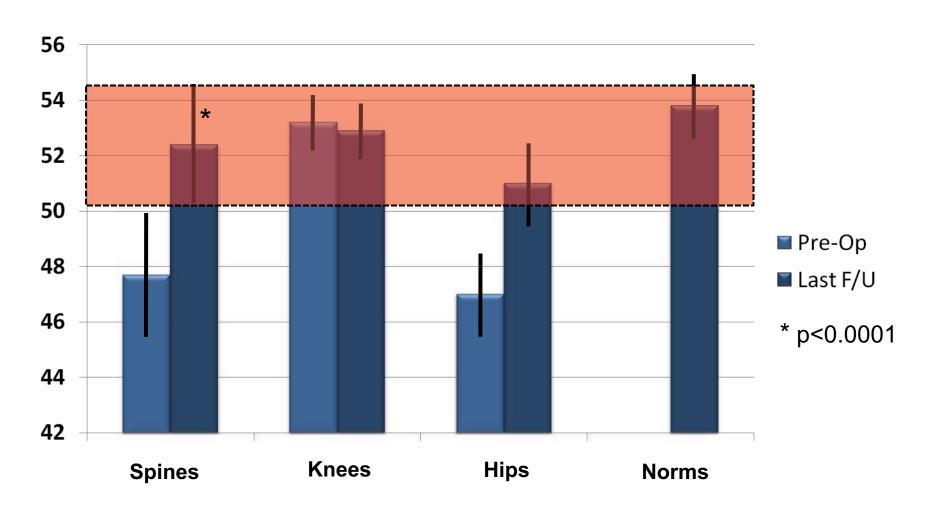
	Spine	Hip	Knee	Population norms
Studies		2	3	1
Number	98	276	791	455
Females (%)	73*	44	59	51
Age (mean, range)	67 (21-90)	62 (22-89)	69 (29-83)	55-74
Pre-op PCS-12 (mean, 95%CI)	28 (27-30)	30 (28-31)	30 (29-31)	44 (42-45)
Pre-op MCS-12 (mean, 95%CI)	48 (46-50)	47 (46-49)	53 (52-54)	54 (53-54)

^{*} p<0.001 compared with all other groups

Results $PCS-12 \, (\text{means} \, \pm \, \text{detectable difference})$



Results MCS - 12 (means, 95% CI)



Discussion

- PCS-12 change scores:
 - No difference between spine surgeons: +12 vs. +11
 - Similar between spinal fusions and large joint arthroplast 60s
 - PCS-• Spines: **1** (9<mark>5%</mark>CI: 9-14) Surgeon 1 (95% CI: 9-13) PreO
 - Hips:
 - Knees:

Conclusion

- ↑Quality of Life *Spine* = ↑Quality of Life *Knee & Hips*
- ↑Quality of Life Spine ≈ Quality of Life Norms

References:

Spine surgery:

- Polly DW et al. SF-36 PCS Benefit-Cost Ratio of Lumbar Fusion Comparison to Other Surgical Interventions A
 Thought Experiment Spine 2007
- Rampersuad YR et al. Assessment of Health-Related Quality of Life following surgical treatment of focal symptomatic spinal stenosis compared to osteoarthritis of the hip or knee. *Spine J, 2008*

– THR:

- Ostendorf et al. JBJS (Br) 2004
- Danesh-Clough. J Arthroplasty 2007

- TKR:

- Hartley et al. JBJS 2002
- Muller et al. JBJS (Br) 2006
- Bourne et al. Clin Orth 2007

Population norms:

 Avery et al. Quality of Life in South Australia measured by SF-12. Population Research & Outcome Studies Unit, Dept Human Services, South Australia, 2004