

Paper Category:	Poster display
Paper Title: (Arial Font; 14 Pt Size)	Clinical Characteristics of Older Adults Receiving Operative versus Conservative Management for Fragility Hip Fractures at Tertiary Public Hospital in Malaysia
Abstract Body: (Arial Font; 12Pt Size)	<ul style="list-style-type: none"> • Background • Objectives • Method • Results • Discussions and Conclusions
<p>(Maximum word limit - 300 words)</p> <p>Background:</p> <p>Fragility hip fractures are common in elderly.</p> <p>Objectives:</p> <p>We aim to describe specific characteristics of fragility hip fracture patients and evaluate factors that might influence treatment decisions.</p> <p>Methods:</p> <p>A retrospective study was conducted on 56 patients who were admitted to Klang General Hospital with fragility hip fractures between January 2022 and June 2022.</p> <p>Results:</p> <p>The surgical rate was 64.3%, while the non-surgical rate was 35.7%. Among those who were not operated on, 70% refused the procedure, 25% were medically unstable, and 5% had financial constraints. Among the patients who underwent surgery, 17% experienced delirium, whereas 25% of non-operated patients experienced delirium. Among the patients who underwent surgery, only 11.10% were categorized as ASA 1, while the remaining 88.90% were classified as ASA 2. However, among the non-operated cohorts, 26.3% of ASA 1 and 63.2% of ASA 2 patients did not receive operative intervention, despite having mild systemic disease or well-managed chronic conditions. Within the cohort of patients who underwent surgery, the majority (97.20%) were able to walk independently, while a small percentage (2.80%) required assistance for mobility prior to the fracture. In contrast, it was observed that the proportion of patients who did not undergo surgery had lower independent mobility prior to the fracture (78.90%) compared to those who underwent surgery (p-value = 0.041). All patients who received surgical treatment were able to return home after being discharged, while 16.7% of those who did not undergo surgery were institutionalized (p-value = 0.011). At discharge, nearly 30% of patients who underwent surgery and 50% of patients who were treated conservatively did not receive anti-osteoporosis medications.</p>	

Discussions and Conclusions:

Being able to walk independently before the fracture increases the likelihood of receiving surgical intervention. Surgical intervention increases the likelihood of being discharged to home, which may indicate improved health or a reduced need for long-term institutional care.

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