LSU Health Science Center LSU Health Digital Scholar

Medical Research Day

2022 Medical Research Day Posters

Oct 13th, 12:00 AM

Disparities Associated with Total Joint Arthroplasty Transfusion and Complication Rates

Shelby Meckstroth LSU Health Sciences Center- New Orleans

Andrew Chapple LSU Health Sciences Center- New Orleans, achapp@lsuhsc.edu

Peter Krause LSU Health Sciences Center- New Orleans, PKraus@lsuhsc.edu

Deryk Jones Ochsner Health Systems

Lauren Leslie Ochsner Health Systems

See next page for additional authors

Follow this and additional works at: https://digitalscholar.lsuhsc.edu/sommrd

Part of the Orthopedics Commons

Recommended Citation

Meckstroth, Shelby; Chapple, Andrew; Krause, Peter; Jones, Deryk; Leslie, Lauren; and Dasa, Vinod, "Disparities Associated with Total Joint Arthroplasty Transfusion and Complication Rates" (2022). *Medical Research Day*. 60. https://digitalscholar.lsuhsc.edu/sommrd/2022MRD/Posters/60

This Event is brought to you for free and open access by the School of Medicine at LSU Health Digital Scholar. It has been accepted for inclusion in Medical Research Day by an authorized administrator of LSU Health Digital Scholar. For more information, please contact aolini@lsuhsc.edu.

Presenter Information

Shelby Meckstroth, Andrew Chapple, Peter Krause, Deryk Jones, Lauren Leslie, and Vinod Dasa

This event is available at LSU Health Digital Scholar: https://digitalscholar.lsuhsc.edu/sommrd/2022MRD/Posters/60



Disparities Associated with Total Joint Arthroplasty Transfusion Rates



Shelby Meckstroth, MPH¹, Andrew Chapple, PhD¹, Peter Krause, MD¹, Deryk

Jones, MD², Lauren Leslie, DO², Vinod Dasa, MD¹

Louisiana State University Health Sciences Center, New Orleans, LA1, USA and Ochsner Health Systems, New Orleans, LA2

Background

- Black patients are at increased risk of complications following orthopaedic surgeries, including Total Joint Arthroplasty (TJA)¹
- Transfusion increases complications following surgery:^{2,3}
 - Infection
 - Readmission
 - Longer length of stay
- There has been a significant decline in transfusion rates over time⁴
- Previous studies showed that both Black patients and women undergoing TJA had higher transfusion rates^{5,6}
- Previous studies have not identified confounding variables that influence the rate of transfusion in TJA cases across demographic groups

Aims

- Investigate the impact of patient demographics on transfusion rates
- · Identify trends in transfusion rates for TJA over time
- Explore variables related to transfusion rates across demographic groups

Methods

- We identified TJA patients from the Ochsner Healthcare Network from 2013 to 2021
- Patients with a diagnosis code that indicated a fracture within 30 days of surgery were excluded from the analysis to focus on elective surgeries
- Fisher exact to compare categorical covariates across transfusion groups, and Wilcoxon rank-sum tests to compare continuous covariates were used
- Multivariable logistic regression was performed to predict whether transfusion occurred based on patient covariates within 5 days of surgery

Variable	OR (CI)	P-value	
Black v White	1.75 (1.33-2.31)	<.001	-
Male Gender	0.77 (0.56-1.06)	0.111	•
Smoking	0.78 (0.56-1.08)	0.138	•
BMI>=40	0.87 (0.65-1.18)	0.38	•
Private Insurance	0.99 (0.67-1.46)	0.955	+
Hip Surgery	1.07 (0.79-1.45)	0.651	•
Age (Continuous)	1 (0.98-1.01)	0.859	•
CCI (Continuous)	1.11 (1.03-1.21)	0.007	•
Surgery Year (Continuous)	0.78 (0.74-0.83)	<.001	•
Creatinine (Continuous)	0.98 (0.82-1.17)	0.835	•
Hemoglobin (Continuous)	0.66 (0.61-0.71)	<.001	
			0 1 2 3

Results





Figure 2. Empirical (top) and predicted (bottom) probabilities of transfusion in black and white patients. A) Observed probability of transfusion by year in each racial group. B) Observed probability of transfusion within each Hgb percentile group. C) Average predicted transfusion probability by year. D) Average predicted transfusion probability based on continuous hemoglobin.

Results Continued

•We identified 7,595 patients, of which, 233 (3.0%) had transfusion at the time of TJA

•Black patients had a higher rate of transfusion than White patients overall (4.9% vs. 2.2%)

•After adjusting for confounding variables, the biggest factor associated with a higher risk of transfusion was being Black (aOR = 1.75, 95% CI = 1.33-2.31)

Discussion and Future Directions

•Transfusion rates for TJA patients are declining, however Black patients continued to receive transfusions at higher rates than white patients, despite similar hemoglobin levels

•It is imperative to understand why this disparity exists and understand physician decision making surrounding transfusion

•Further analyses will allow for interventions in perioperative care to eliminate this disparity and improve TJA outcomes across different racial groups

Acknowledgements

Thank you to my mentor, Dr. Vinod Dasa for his support on this project and to Dr. Chapple for his help with study design and data analysis. Thank you to Dr. Peter Krause, Dr. Deryk Jones, and Dr. Lauren Leslie for their guidance on study design and writing.

References

- Cram P, Hawker G, Matelski J, Ravi B, Pugely A, Gandhi R, Jackson T. Disparities in Knee and Hip Arthroplasty Outcomes: an Observational Analysis of the ACS-NSQIP Clinical Registry. J Racial Ethn Health Disparities. 2018 Feb:5(1):151-161. doi: 10.1007/s40615-017-0352-2. Enub 2017 Mar 24. PMID: 2842028: PMCID: PMCC510927.
- Feds 5(1):151-161, doi: 10.1007/e005107.0352-2. Eppb 2017 Mar; 24 FMID: 28342028; FMCID: FMCS10027 (2007); 2007
- Kim JL, Park JH, Han SB, Cho IY, Jang KM. Allogencic Blood Transfusion Is a Significant Risk Factor for Surgical-Site Infection Following Total Hip and Knee Arthroplasty: A Meta-Analysis. J Arthroplasty. 2017 Jan;32(1):320-325. doi: 10.1016/j.arth.2016.08.026. Epub 2016 Aug 31. PMID: 27682006.
 Kimball CC, Nichols CI, Vose JG. Blood Transfusion Trends in Primary and Revision Total Joint Arthroplasty: Recent
- Kimball CC, Nichols CI, Vosz /G. Blood Transfusion Trends in Primary and Revision Total Joint Arthrophasty: Recent Declines Are Not Shared Equally J. Am Acad Orthops Syra; 2019 Oct. 152;72(0):920-927. doi: 10.4533/AAOS-D-18-00205. PMID: 30676313. Cesari M, Calvani R, Marzetti E, Frailty in Older Persons. Clin Geriatr Med. 2017 Arg;33(3):293-330. doi: 10.1016/j.gcze2017.02.002. Epub 2017 Apr 6- PMID: 28689563.
- Browne JA, Adib F, Brown TE, Novicoff WM. Transfusion rates are increasing following total hip arthroplasty: risk factors and outcomes. J Arthroplasty. 2013 Sep;28(8 Suppl):34-7. doi: 10.1016/j.arth.2013.03.035. Epub 2013 Jul 26. PMID: 23896359.
- Upfill-Brown, A., Paisner, N. & Sassoon, A. Racial disparities in post-operative complications and discharge destination following total joints arthroplasty: a national database study. Arch Orthop Trauma Surg (2022). https://doi.org/10.1007/s0040-2022-4448-5.3