

## Our Mission

Operation of Online Open access journals and organizing scientific and business events.

## Our Vision

The Main Vision of OMICS Group is to make Healthcare and Scientific Information Open Access



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important for prescribing physicians to recognize when counseling patients on increasing physical activity. Patients with cardiovascular risk factors that might benefit from an exercise routine may also be at an increased risk of a cardiovascular event if they should happen to sustain a hip fracture. Post-operatively, great care should be taken to monitor for any signs and symptoms of a cardiac complication in this population.

Patients in our study had no significant difference in the time or delay to surgery based on age. Although no in-hospital mortality difference was found, our results suggest that older patients with significant cardiovascular risk factors may benefit from a longer period of medical optimization prior to surgery. A thorough, pre-operative cardiac clearance may help reduce the incidence of cardiovascular events in those at risk. The literature reports conflicting evidence on the impact surgical delay can have on hip fracture outcomes [8,19-22]. While surgery within 48 hours of injury is the generally accepted standard for hip fracture treatment, some studies have shown equivalent outcomes for patients with delays greater than two days [8]. Patients with comorbidities, particularly cardiovascular, requiring a period of stabilization before going to the operating room had similar outcomes as patients who underwent surgery within the 48 hour time frame [8].

Demographic analysis of our study revealed a significantly greater percentage of female patients in the older age group. This gender distribution has been previously well documented in the literature. Women are roughly two to three times as likely to sustain a hip fracture than men and almost half of all women that reach age 90 have sustained a hip fracture in their lifetime [1,16]. Women over the age of 75 also have the highest prevalence of chronic disease and disability [14,15]. Physicians should be aware of these realities when recommending an exercise regimen, particularly in the female patient population. Creating a patient-specific program with safety in mind may help to alleviate some of the burden hip fractures can have on elderly women.

Although more common in women, elderly patients across the board are at an increased risk for injury as well as post-operative complications resulting from hip fracture. While it is important for healthcare providers to continue to recommend physical activity, the results of the study suggest that for elderly patients, particularly women, a more cautious approach to exercise may be warranted. Further research is needed to determine the optimal balance between activity and safety in this population.

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