## No. 2

# Impact of Covid-19 on orthopedic patient in Slovenia: Hip and knee replacement surgery, 90-day mortality, outpatient visits and waiting times

Vesna Levašič<sup>1</sup>; Denia Savarin<sup>1</sup>, Simon Kovač<sup>1,2</sup> <sup>1</sup>Valdoltra Orthopaedic Hospital, The National Arthroplasty Registry of Slovenia (RES), Jadranska cesta 31, Ankaran, Slovenia <sup>2</sup>Faculty of Medicine University of Maribor, Department of Orthopaedics, Taborska ulica 8, 2000 Maribor, Slovenia E-mail: vesna.levasic@ob-valdoltra.si Presenter: Vesna Levašič

### Introduction

The purpose of the study was to analyse what was the impact of the COVID-19 pandemics on different needs of the orthopaedic patient, i.e. the access to hip and knee replacement surgery, 90-day mortality, waiting times and outpatient clinic visits.

### Materials and Methods

We compared the records of patients from The National Arthroplasty Registry of Slovenia with Hip Replacement (HR) and Knee Replacement (KR) in 2019 and 2020. We used Chisquare test to compare reasons for revision, 90-day mortality and the 95% confidence intervals (CI) to compare median values of number of operations, outpatient visits and waiting times.

### Results

We noticed the fall of all operations for 19% from 7825 to 6335. The number of Primary HR declined from 4069 to 3436 (16%). The number of Primary KR has fallen from 3191 to 2423 (24%). Hip revisions dropped for 10% and knee revisions for 33%. We did not find differences in 90-day mortality (p=0.494). Outpatient clinic visits fell from 228682 to 196582 (14%) per year. Waiting times increased for 56 (15%) days for HR and 54 (12%) for KR. The differences were not statistically significant at p>0.05.

### **Discussion/Conclusion**

There was an inevitable drop in number of surgeries and outpatient clinic visits in the spring and autumn lockdown in 2020. With the reorganisation of the orthopaedic service in Slovenia we enabled to maintain the number of KR and HR in high level despite the pandemics. An epidemiological model, telemedicine and activity-based funding could overcome the impact of the epidemic.

<u>Notes</u>