

# SHORT-TERM QUALITY OF LIFE ASSESSMENT IN TOTAL HIP ARTHROPLASTY PATIENTS IN DIFFERENT HEALTH CARE SECTORS

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## OBJECTIVES

The aim of the study is to examine how total hip arthroplasty improves quality of life in the short term and to compare the extent of improvement in public and private health care.

## METHODS

Patients were selected at the Department of Orthopedics, Clinical Centre of the University of Pécs and at the Da Vinci Private Clinic in Pécs (Hungary) in 2023. Patients completed the SF-36 and Oxford Hip Score (OHS) questionnaires before the surgery and 6 weeks later.

## RESULTS

The research involved 205 people, of whom 180 patients completed the quality of life questionnaires entirely; 95 patients from public health (39 males, 56 females, mean age: 68.85 years) and 85 from private health (47 males, 38 females, mean age: 65.49). The Oxford Hip Score questionnaire scores of both public and private health care patients improved significantly at postoperative 6th week (from 16.61 to 30.0 for public health patients and from 19.02 to 35.19 for private patients ( $p<0.001$ )) (*Figure 1*). The SF-36 Physical Health scores also showed a significant increase, from 28.84 to 48.09 for patients in the public health and from 31.10 to 57.84 for patients in the private health sector ( $p<0.001$ ) (*Figure 2*). The SF-36 Mental Health score improved significantly only in private patients (public patients: from 74.43 to 77.77 ( $p=0.156$ ), private patients: from 69.33 to 79.30 ( $p<0.001$ )) (*Figure 3*). Quality of life improvements were similar between the two health care sectors (OHS ( $p=0.105$ ), SF-36 Mental Health ( $p=0.057$ )), but the SF-36 Physical Health score improved more for private patients ( $p=0.016$ ).

## CONCLUSIONS

According to the results, quality of life after total hip arthroplasty can improve significantly in the short term, even 6 weeks after surgery. The extent of improvement was similar in public and private health care patients (with the exception of the SF-36 Physical Health score, which improved more in private patients).

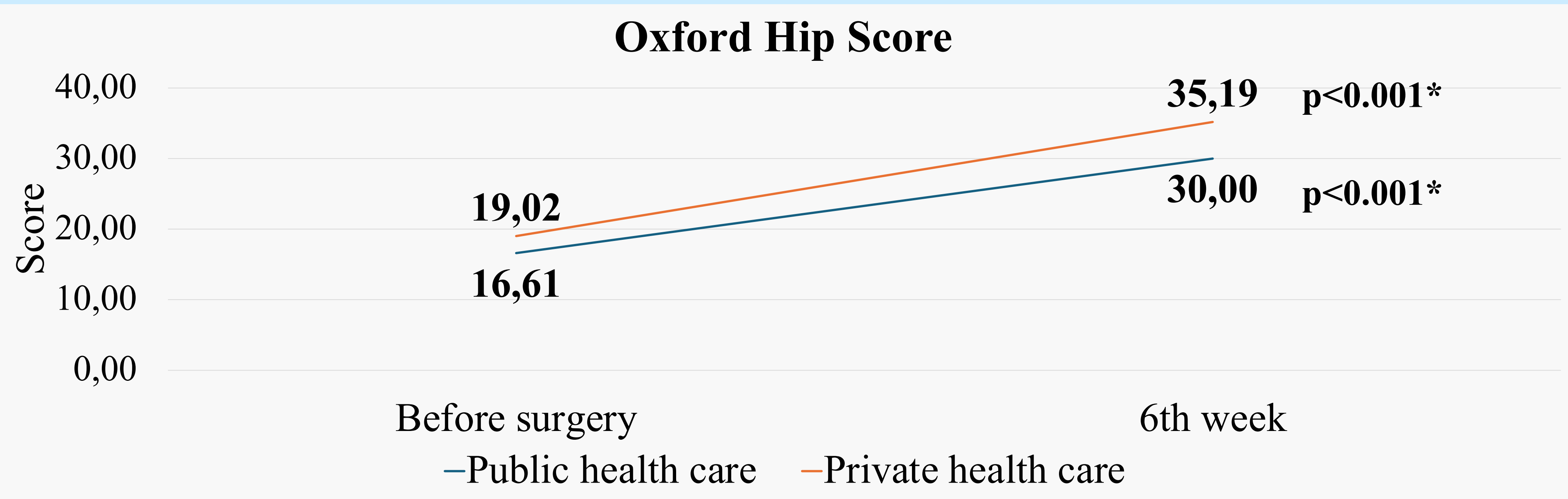


Figure 1. Changes in the Oxford Hip Score in public and private health care

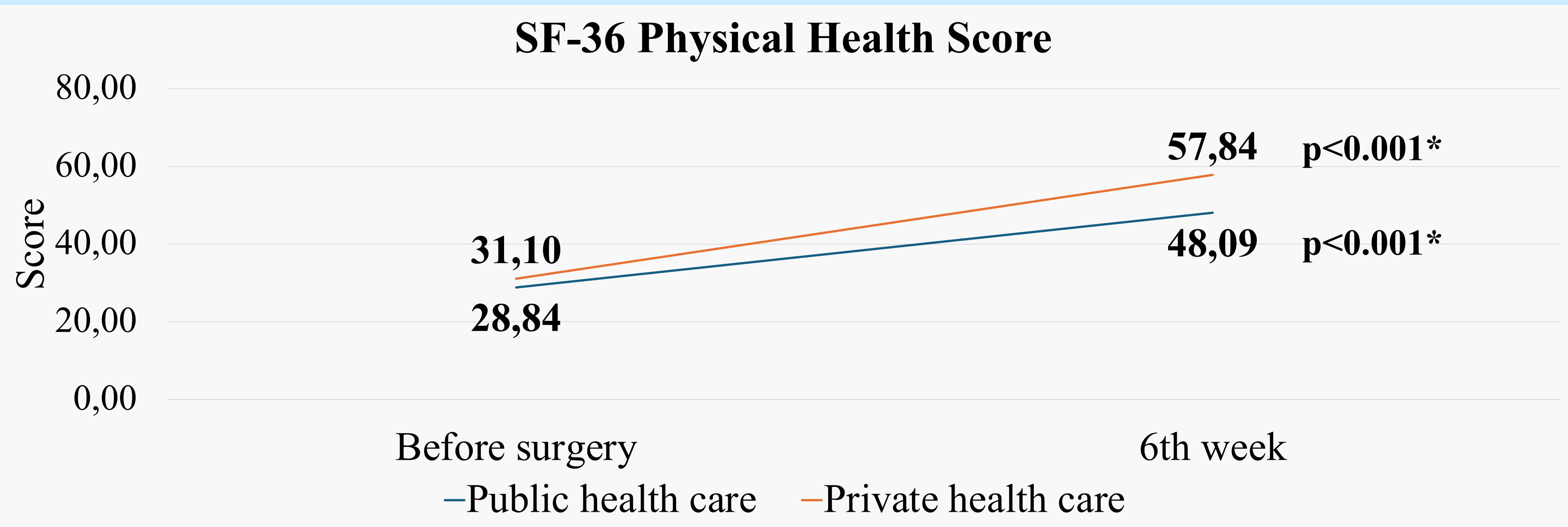


Figure 2. Changes in the SF-36 Physical Health Score in public and private health care

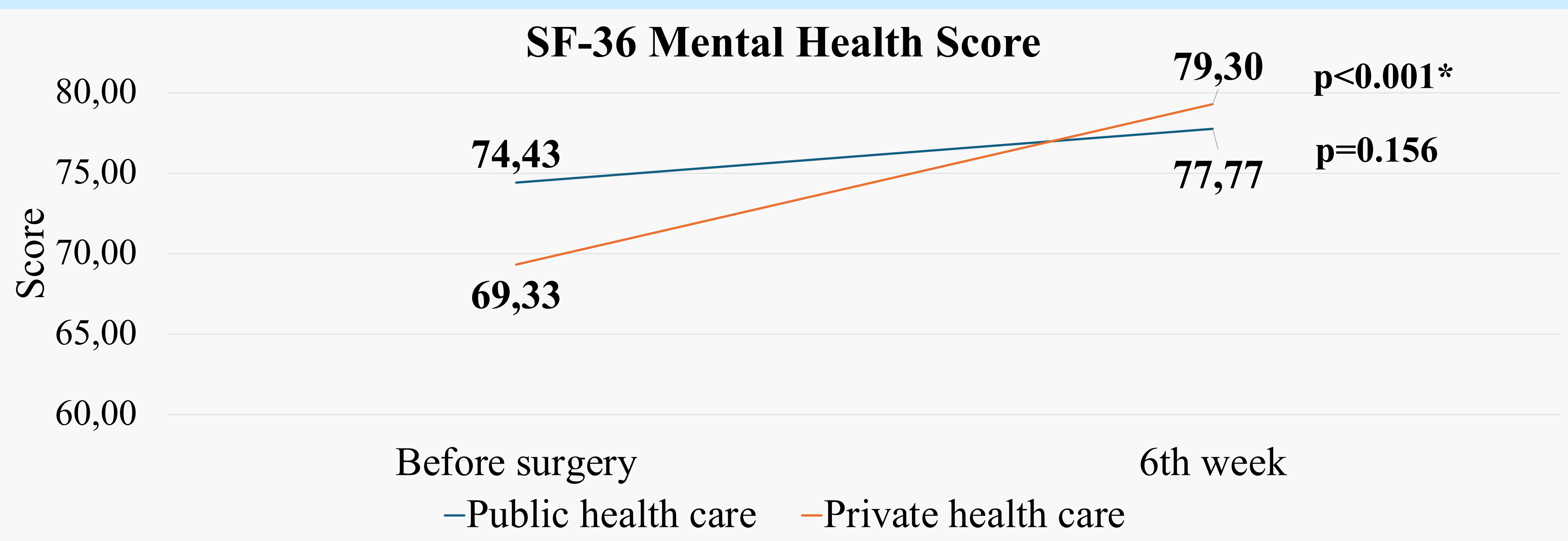


Figure 3. Changes in the SF-36 Mental Health Score in public and private health care

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