News Release
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One in five awaiting new hip suffering extreme pain, study shows

Almost 20 per cent of people awaiting hip replacements are experiencing extreme pain or discomfort, a study shows.

Researchers also found that 12 per cent of patients on waiting lists for knee replacements considered themselves to be in a similarly acute state of health.

The figures are worse than for many other chronic health conditions, such as diabetes, heart failure or lung diseases.

Researchers at the University of Edinburgh say the findings disprove the perception that hip and knee arthritis only causes mild discomfort and that surgery is considered optional.

They measured more than 4000 Scottish patients’ health conditions using an internationally approved score called the EQ-5D – the first time this has been done.

This rating measures a patients’ ability to perform routine activities and look after themselves, as well as their levels of mobility, discomfort and anxiety.

The researchers measured the health states of more than 2000 people waiting for a total hip replacement and found that 19 per cent were in extreme pain or discomfort – a state defined as “worse than death” by the EQ-5D.

Some 12 per cent of the 2000-plus patients waiting for knee replacements said they were in a similar condition.

These scores improved dramatically following joint replacement, experts say.

The study is published in the Bone and Joint Journal.

Hip and knee replacements are highly cost-effective treatments with long lasting and almost immediate benefit from the pain and disability from arthritis, according to the study’s authors.

Despite this, patients receiving these procedures are the first to have their treatment limited or cancelled.

Chloe Scott, Consultant Orthopaedic Surgeon and honorary senior clinical lecturer at the University of Edinburgh, said: “Patients with the most extreme EQ-5D scores should be a
priority for health care delivery. Indeed, given the overall high levels of pain and disability described by all patients awaiting joint replacement compared with most other illnesses, access to appropriate treatment should be free and available to all at the time of need not limited by cost or bed availability.”

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