

It may take up to a year to get through elective surgeries due to COVID-19

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A new study by Johns Hopkins researchers found that it may take between seven and 16 months for surgeons to complete the backlog of elective orthopaedic surgeries that have been suspended during the COVID-19 pandemic. This accounts for more than a million surgeries in the U.S. for spinal fusion and knee and hip replacements.



The study was published online May 12 in The Journal of Bone and Joint Surgery.

Lead author Amit Jain, M.D., chief of minimally invasive and outpatient spine <u>surgery</u> and associate professor of <u>orthopaedic surgery</u> and neurosurgery at the Johns Hopkins University School of Medicine, says that in fields such as orthopaedic surgery, where procedures are frequently performed in an inpatient setting, the ramp-up may be slower than surgeries typically done in outpatient facilities. "We will keep adding to the backlog as long as we are not operating at 100% capacity," states Jain.

Jain and his colleagues used the Agency for Healthcare Research and Quality National Inpatient Sample, a <u>national database</u> that contains hospital inpatient data, to model the number of current and forecasted spinal fusion and hip and knee replacement surgeries in the United States. The researchers found that, in an optimistic scenario where most elective surgeries are back to full capacity in June, it would take approximately seven months to get through the backlog. Delays to the ramp-up to full capacity could extend the backlog to 16 months.

To help ease the backlog, Jain proposes several strategies to increase surgical throughput, including more use of telemedicine. At Johns Hopkins, telemedicine use has skyrocketed. He also suggests making more timeslots available in operating rooms for orthopaedic surgeries, increasing care coordination resources and shifting care to ambulatory surgery centers as much as possible.

More information: Amit Jain et al, SARS-CoV-2 Impact on Elective Orthopaedic Surgery, *The Journal of Bone and Joint Surgery* (2020). DOI: 10.2106/JBJS.20.00602



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