



## MEDIA RELEASE



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# Time to surgery is critical for survival after hip fracture

## *1 in 4 people who fracture their hip die within a year*

Many people with a hip fracture wait longer than is optimal for surgery – despite some hospitals making a dramatic improvement in time to surgery in the past few years.

Today the Australian Commission on Safety and Quality in Health Care (the Commission) is launching the updated national clinical care standard for hip fracture at the binational [Hip Fest 2023](#) conference, hosted by the Australian & New Zealand Hip Fracture Registry (ANZHFR).

The updated standard reduces the recommended maximum time to surgery – along with other improvements for better care – and will drive meaningful change as hospitals establish protocols to meet these targets.

Every year in Australia, 19,000 people fracture their hip<sup>i</sup>, usually after a fall. Most hip fractures happen to people over 65 years and are often a life changing event.

Australia's ageing population makes taking action on hip fracture more important than ever.

Hip fracture significantly increases an older person's risk of death, with one in four people dying within 12 months after a hip fracture injury.<sup>ii</sup> Of those who survive, many lose their ability to live independently or return to their former lifestyle.

The updated [Hip Fracture Clinical Care Standard \(2023\)](#) for hospitals has reduced the maximum time to surgery from 48 hours to 36 hours in line with international guidelines. For the first time, this explicitly includes patients who need to be transferred to a hospital that can perform the surgery.

The Commission's Acting Chief Medical Officer, emergency physician **Associate Professor Carolyn Hullick**, said there was an urgent need for health services to offer better care for people with a hip fracture, using the framework in the updated standard.

"Anyone who has seen someone live through a hip fracture knows it's much more than a broken bone. People with a hip fracture tend to be older, frail and more vulnerable, so it is critical the fracture is repaired quickly to reduce pain and get them on the road to recovery back to independence," she said.

"The data is sobering, as an Australian with a hip fracture is almost four times more likely to die within a year than someone of the same age who isn't injured. This has an immense personal toll on individuals and families, in addition to the burden on our health system of around \$600 million each year."<sup>iii</sup>

Much has improved since the *Hip Fracture Clinical Care Standard* was introduced in 2016, according to [ANZHFR](#) annual reports. The ANZHFR contains around 90,000 records, with 91% of hospitals performing hip fracture surgery in Australia participating to help improve their hip fracture care.

While some hospitals have substantially reduced their time to surgery, there is still marked variation. In 2022, the average time to surgery ranged from 16 to 92 hours,<sup>ii</sup> with the longest waiting times for people being transferred for surgery. 78% of patients had surgery within 48 hours.

## A lever for change: ‘We can and should do better’

Geriatrician **Professor Jacqueline Close**, Co-Chair of the ANZHFR and Co-Chair of the expert advisory group for the standard, knows first-hand the value of high-quality care for hip fractures and believes the updated standard will be a lever for change.

“The *Hip Fracture Clinical Care Standard* sets expectations for how every patient should be cared for, while allowing for treatment to be tailored to the individual,” she said.

“The adage ‘don’t let the sun set twice before hip fracture repair’ has merit for several reasons. Firstly, no-one wants to see their mum or dad fasting and in pain waiting for surgery; and shorter time to surgery is associated with fewer complications, better recovery and survival.

“It is also more cost efficient to manage these patients well. Every day surgery is delayed, two days are added to the length of stay. The sooner you operate, the quicker patients can get walking and go home.”

Professor Close said the registry data shows Australia can do better in several key areas of hip fracture care. “The evidence tells us the sooner you are supported to get out of bed, the better your functional recovery. Last year, fewer than half (45%) of patients walked on the first day after hip fracture surgery.

“Also, only one third (32%) of patients leave hospital on bone protection medication for osteoporosis to prevent another fracture. We absolutely can and should do better,” she said.

**A/Professor Hullick** added: “Older people can have complex needs, and research shows the best results come when specialists from both orthopaedic surgery and geriatric medicine work together on a patient’s care – known as an orthogeriatric model of care.

“This means that as well as repairing the bone, we are managing the person’s other medical conditions, their cognitive function, their mobility and reducing the risk of more falls and fractures. This has been a focus since the standard was first introduced, with many hospitals now having orthogeriatric teams.

“The standard has already been a catalyst for change. By updating it and addressing the gaps, care will continue to improve. It will be fantastic to see a solid boost to patient outcomes as hospitals embed these latest changes.”

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**More information:** [safetyandquality.gov.au/hipfracture-ccs](https://safetyandquality.gov.au/hipfracture-ccs)

**Highlights infographic:** [Hip Fracture Care in Australia](#)

### Media enquiries

Angela Jackson, Communications and Media Manager  
M: 0407 213 522 | E: [angela.jackson@safetyandquality.gov.au](mailto:angela.jackson@safetyandquality.gov.au)

### About the Commission

The Australian Commission on Safety and Quality in Health Care is an Australian Government agency that leads and coordinates national improvements in the safety and quality of health care based on the best available evidence. By working in partnership with patients, carers, clinicians, the Australian, state and territory health systems, the private sector, managers and healthcare organisations, the Commission aims to ensure that the health system is better informed, supported and organised to deliver safe and high-quality care. [www.safetyandquality.gov.au](https://www.safetyandquality.gov.au)

[Overview of the Clinical Care Standards](#)

<sup>i</sup> Australian Institute of Health and Welfare. [Hip fracture incidence and hospitalisations in Australia 2015–16](#)

<sup>ii</sup> Australian and New Zealand Hip Fracture Registry. [ANZHFR Annual Report 2023](#)

<sup>iii</sup> Australian Institute of Health and Welfare. [Disease expenditure in Australia 2019–20](#)