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EP2.17 The impact of socioeconomic status on outcomes from treatment for femoroacetabular impingement in the UK patient group

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Introduction: There is little known about how patient socioeconomic status impacts clinical outcomes in hip preservation surgery. The aim of this study was to evaluate the relationship between indices of multiple deprivation, funding provider (NHS Funded or Private Funded) and clinical outcomes following surgery for femoroacetabular impingement (FAI)

Method: The study analysed the data of 5590 patients recorded in the NAHR who underwent primary hip arthroscopic treatment for FAI between November 2013 and July 2023. Records were matched to the UK National index of multiple deprivation using the lower layer super output area. Using iHOT12 score, patient reported outcome measures were analysed at base line and 1 year following surgery.

Results: 2358 records were matched to LLSOA deciles. Between the lowest (most deprived) 3 deciles and the highest (least deprived) the average baseline iHOT12 score was 28.98 (n=366) and 35.33 (n=821). The proportion of patients receiving treatment through NHS funding compared to independent funding for the most deprived, 292 (90%) 37 (10%) respectively compared to the least deprived 515 (70%) and 244 (30%) respectively. At 1year, iHOT12 scores for each group were 51.64 (29.1 SD) compared to 61.5 (28.06 SD) respectively.

Conclusion: The study demonstrates that patients from lower socioeconomic backgrounds had poorer baseline and one-year post-surgery iHOT12 scores compared to those from higher socioeconomic strata. Furthermore, a higher reliance on NHS funding was observed among the most deprived, while more affluent patients predominantly opted for private funding. These findings underscore the significant influence of socioeconomic status on both the quality of healthcare received and recovery outcomes in hip preservation surgery, calling attention to the need for more equitable healthcare solutions.