IMPROVING PATIENT EDUCATION AND IMPLEMENTATION OF ERAS GUIDELINES ON EARLY MOBILISATION FOLLOWING HIP OR KNEE REPLACEMENT SURGERY

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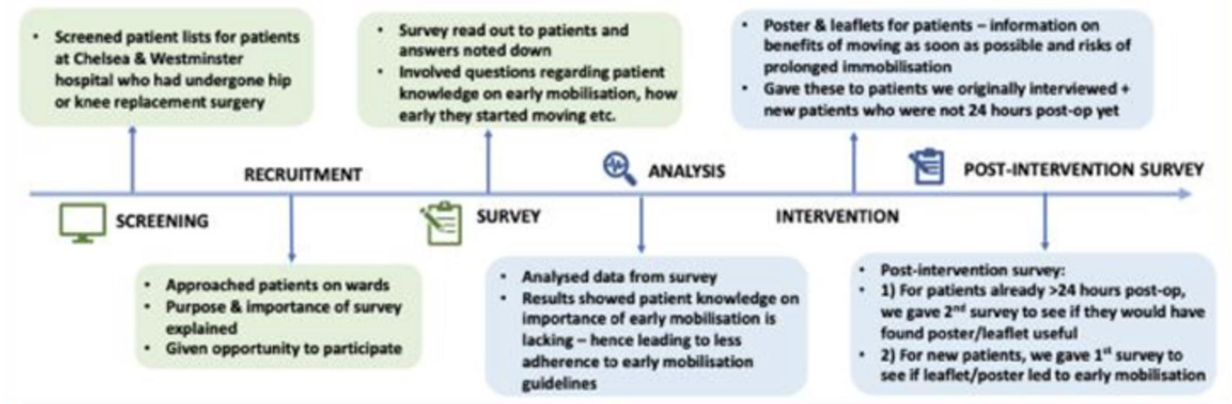
IMPERIAL

Introduction

Early post-operative mobilisation is a central tenet of the ERAS pathway following lower limb surgery1, facilitating **early discharge** and **combating physiological harm** and **post-operative complications**. Barriers to early mobilisation however include clinical factors, staffing restraints and patient compliance. In other surgical fields, educational strategies have been employed to **improve patient understanding and motivation** for early mobilisation[2].

We aimed to evaluate patient understanding of early post-operative mobilisation, to improve patient motivation and compliance with ERAS recommendations, measured as mobilisation within 24 hours post-surgery.

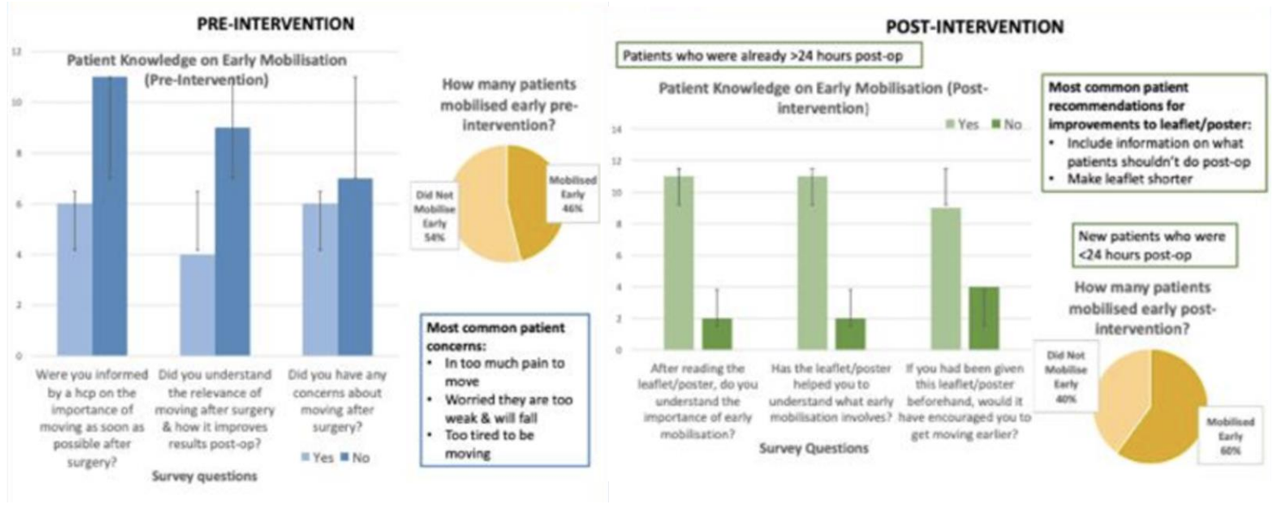
Methods



We audited compliance with ERAS recommendation for mobilisation in the first 24 hours post-surgery for all patients who underwent THR or TKR over 14 days (n=18). We also recorded whether patients were aware of the benefits of early mobilisation and whether they have been encouraged to by ward teams.

Based on our initial findings, we created and distributed patient-centred information leaflets and posters around the orthopaedic unit, outlining the benefits and safe practices of early mobilisation. Patient knowledge was then assessed via electronic survey, and mobilisation rates were re-audited post-intervention (n=20).

Results



Lack of knowledge or understanding of ERAS guidelines was the most common reason cited by patients who had not been mobilising, followed by lack of available staff to support patients. Following our intervention, we demonstrated increased self-reported patient knowledge on the benefits of early mobilisation and an absolute increase in number of patients mobilising within 24 hours (46% vs 60%). There was a direct correlation between patients who stated they have reviewed the patient information leaflet and those who had mobilised. There was no significant variation in patient compliance following hip surgery versus knee surgery.

Conclusion

Prominent visible patient information leaflets and posters **can combat patient reservation** and **improve understanding of early mobilisation** recommendations, **without increasing burden on staff**. There is likely correlation between patients who are more engaged with their care and concordance with ERAS recommendations. Further quality improvement cycles could include expansion to include multiple languages.

1. Wainwright et al. (2019) Consensus statement for perioperative care in total hip replacement and total knee replacement surgery: Enhanced Recovery After Surgery (ERAS®) Society recommendations. Acta Orthopaedica. https://doi.org/10.1080/17453674.2019.1683790
2. Tazreean et al. (2021)Early mobilization in enhanced recovery after surgery pathways: current evidence and recent advancements. Journal of Comparative Effectiveness Research https://doi.org/10.2217/cer-2021-025