Poster Presentations

46 MEASURING THE IMPACT OF COVID-19 RESTRICTIONS ON MOBILITY IN OLDER ADULTS WITH FRAGILITY FRACTURES USING THE NEW MOBILITY SCORE

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Background: The WHO declared COVID-19 a pandemic in March 2020. Specific public health measures were implemented for older adults who were advised to 'cocoon'. While this has a positive effect on disease spread, reduced activity increases the risk of falls and fractures as well as all-cause mortality [1]. The New Mobility Score(NMS) stratifies patients according to pre-fracture mobility and predicts 6-month functional level and 1year mortality [2]. Using the NMS, we evaluated patient mobility pre and post-restrictions. We also obtained basic data, frequency of falls and Clinical Frailty Scale (CFS).

Methods: We prospectively studied 50 patients admitted with a fracture and reviewed by our Orthogeriatric team between August–October 2020.

Results: Mean age was 80 years [range 53–99], 41(82%) were over 70 years and 43 (86%) were female. A hip fracture, 39 (78%) was the most common admission and mean CFS was 4 [Range 1–7] classifying the cohort as mildly frail. Mean NMS was significantly lower post-restrictions compared to pre-restrictions [5 [SD 2.19] vs 6.5 [SD 2.15] [P = 0.0074]]. There was no difference in falls pre and post-restrictions [1.1 [S.D 2.3] vs 1.9 [S.D 1.9] [P = 0.0609].

Conclusion: Our study shows that in a vulnerable cohort, COVID-19 restrictions have significantly impacted mobility over a short time period. As a result, our patients are less likely to regain pre-fracture functional level and are at increased risk of all-cause mortality. As further restrictions are implemented, public health strategies for older adults should be prioritised to maintain mobility and prevent adverse outcomes.

References

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