

Florida Injury Facts **Hip Fractures**(Ages 65+)

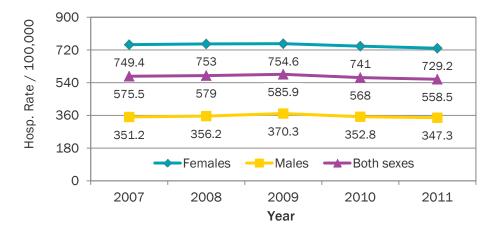
At A Glance

- A hip fracture is a fracture of the neck of the femur or thighbone, usually where it meets the pelvic bone.
- Hip fractures are often related to falls and can lead to a steep decline in health due to an individual's loss of mobility and independence.

In 2011:

- 18,851 Florida seniors, ages 65 and older, were hospitalized for a non-fatal hip fracture.
- 33% of all non-fatal injury hospitalizations among Florida's seniors were related to a hip fracture.

Non-Fatal Hip Fracture Hospitalizations, by Sex and Year, Florida's Senior Residents, 2007–2011

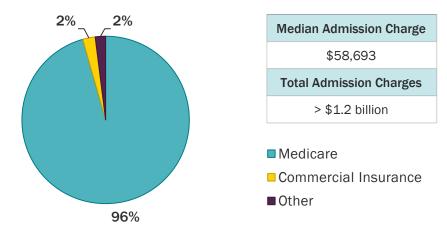


Economic Impact

In 2011:

- The median admission charge for non-fatal injury hospitalizations was \$58,693; total charges exceeded \$1.2 billion. The median length of stay was five days.
- Medicare was the payer source for 96% of these hospitalizations.

Non-Fatal Hip Fracture Hospitalization Admission Charges and Payer Source, Florida's Senior Residents, 2011



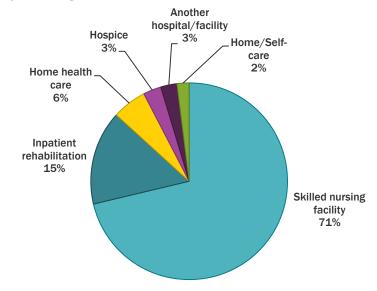
Discharge Status And Outcomes

- Hip fractures can cause severe health problems and lead to reduced quality of life and premature death.¹
- About one in five hip fracture patients dies within one year of their injury.²
- Up to one in four adults who lived independently before their hip fracture has to stay in a nursing home for at least one year after their injury.3

In 2011, among Florida's seniors:

The majority (71%) of patients were discharged to a skilled nursing facility after their hospital treatment; only 2% of patients were discharged directly home.

Non-Fatal Hip Fracture Hospitalizations, by Discharge Status, Florida's Senior Residents, 2011

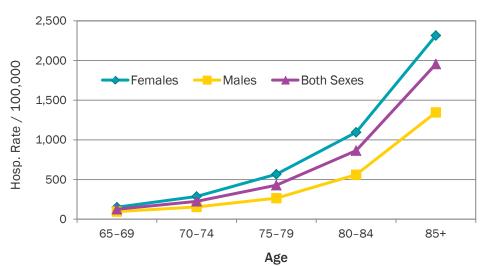


Who Is Injured?

In 2011, among Florida's seniors:

- Females had higher rates of non-fatal hip fracture hospitalizations than their male counterparts.
- The hospitalization rate for non-fatal hip fractures increased dramatically as age increased.

Non-Fatal Hip Fracture Hospitalizations, by Age and Sex, Florida's Senior Residents, 2011



- Females accounted for 72% of non-fatal hospitalizations; Males 28%.
- Whites accounted for 92% of non-fatal hospitalizations, Other Non-Whites for 4% and Blacks for 3%.

Non-Fatal Hip Fracture Hospitalizations, by Sex and Race, Florida's Senior Residents, 2011

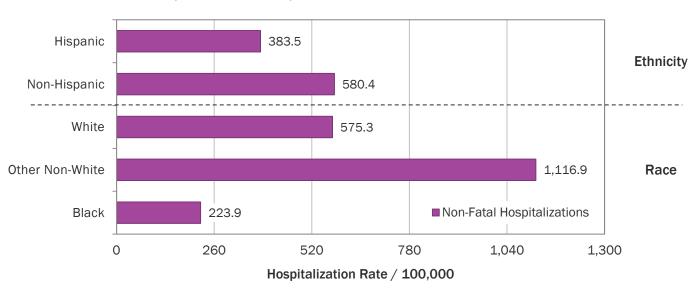
	Female	Male	White	Black	Other Non-White	Both Sexes, All Races
Non-Fatal Hospitalizations	13,611	5,240	17,413	615	823	18,851

^{*}Some records have unknown sex or race; categories may not add up to total.

In 2011, among Florida's seniors:

- Non-Hispanic residents had a higher rate of non-fatal hip fracture hospitalizations than Hispanic residents.
- Other Non-white residents had the highest rate of non-fatal hip fracture hospitalizations, followed by White residents and Black residents.

Non-Fatal Hip Fracture Hospitalizations, by Hispanic Ethnicity and Race, Florida's Senior Residents, 2011

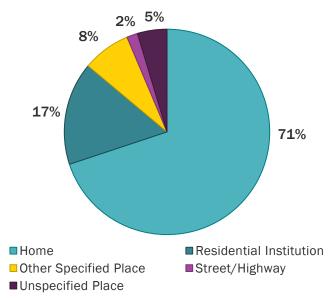


Where And How

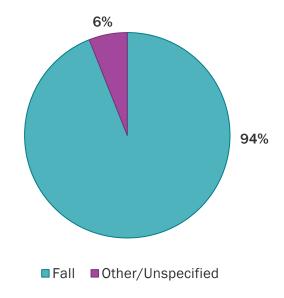
In 2008, when coded (43% of records), among Florida's seniors:

- At least 88% of non-fatal hip fractures requiring hospitalizations occurred in or around a place of residence such as a home or residential institution.
- At least 94% of non-fatal hip fracture hospitalizations were related to a fall.

Non-Fatal Hip Fracture Hospitalizations, by Place of Occurrence, Florida's Senior Residents, 2011



Non-Fatal Hip Fracture Hospitalizations, by Mechanism, Florida's Senior Residents, 2011



Prevention Tips

The most effective way to prevent fall-related injuries, including hip fractures, is to combine exercise with other fall prevention strategies.⁴

- Exercise regularly to maintain or improve strength and balance.
- Have medicines reviewed—both prescription and over-the counter—to reduce side effects and interactions.
- Have yearly eye exams.
- Improve lighting in the home.
- Reduce fall hazards in the home.

Information and Resources

- Centers for Disease Control and Prevention, National Center for Injury Prevention and Control: http://www.cdc.gov/homeandrecreationalsafety/falls/index.html
- Center for Healthy Aging: http://www.healthyagingprograms.org
- National Safety Council: http://www.nsc.org/safety-home/Resources/Pages/Falls.aspx
- Center for Excellence for Fall Prevention: http://www.stopfalls.org
- National Institute on Aging, Age Page: Preventing Falls and Fractures: http://www.nia.nih.gov/HealthInformation/Publications/falls.htm

References

- ¹ Hall SE, Williams JA, Senior JA, Goldswain PR, Criddle RA. Hip fracture outcomes: quality of life and functional status in older adults living in the community. Australian and New Zealand Journal of Medicine 2000;30(3):327–32
- ² Leibson CL, Toteson ANA, Gabriel SE, Ransom JE, Melton JL III. Mortality, disability, and nursing home use for persons with and without hip fracture: a population-based study. Journal of the American Geriatrics Society 2002;50:1644–50.
- ³ Magaziner J, Hawkes W, Hebel JR, Zimerman SI, Fox KM, Dolan M, et al. Recovery from hip fracture in eight areas of function. Journal of Gerontology: Medical Sciences 2000;55A(9):M498–507.
- ⁴ RAND Report: Evidence report and evidence-based recommendations: fall prevention interventions in the Medicare population. Contract no. 500-98-0281. RAND Corporation Southern California Evidence-based Practice Center; 2003.

Data Sources and Case Definitions

Non-Fatal Hip Fracture Hospitalizations: Agency for Health Care Administration, Hospital Discharge Data; Records with Injury Principal Diagnosis and Primary or Secondary Hip Fracture Diagnosis ICD-9 CM 820