

NAZIV DISERTACIJE: PREDIKTORI KVALITETA ŽIVOTA OSOBA TREĆE ŽIVOTNE DOBI POSLIJE UGRADNJE TOTALNE ENDOPROTEZE KUKA**Autor:** Hadžan Konjo**Mentor:** Prof. dr. Dijana Avdić**Datum odbrane:** 14.07.2017.**DOI:** <https://doi.org/10.17532/DD.2017.03>**SAŽETAK**

Uvod: Primjena endoproteze zgloba kuka jedno je od najvećih dostignuća u ortopedskoj hirurgiji unazad nekoliko desetljeća. Primjenom umjetnih zglobova otvorena je nova era u hirurgiji lokomotornog sistema, koja pruža sve uspješnije pristupe u rješavanju terapijske problematike. Istraživanja zaključuju da se efikasnost može unaprijediti ako se uzima u obzir više faktora, i onih koji se tiču kvaliteta života bolesnika i onih koji se tiču endoproteze. Kod osoba s bolestima kuka funkcije istog se značajno smanjuju, aloartroplastika kuka predstavlja ili značajnu uštedu ili dobro materijalno ulaganje u poboljšanje i kratkoročnog i dugoročnog kvaliteta života.

Radne hipoteze: Ugradnja totalne endoproteze kuka kod osoba treće životne dobi dovodi do boljeg kvaliteta života, poboljšava funkcionalni i klinički status osoba treće životne dobi. Kombinovani tretman fizikalne terapije i kineziterapije daje dobre rezultate u smanjenju boli kod osoba treće životne dobi nakon ugradnje totalne endoproteze kuka. Nulte hipoteze su negacija radnih hipoteza.

Ciljevi istraživanja: Ispitati postoje li razlike u kvalitetu života osoba treće životne dobi prije i poslije operacije ugradnje totalne endoproteze kuka. Ispitati postoji li razlika u svakodnevnom postoperativnom funkcionisanju kod bolesnika kod kojih je u sklopu liječenja ugrađena totalna endoproteza kuka, u odnosu na vrijeme prije operativnog zahvata. Ispitati intenzitet bolova, pokretljivost operisanog zgloba kuka i stabilnost endoproteze, mogućnost hoda, korištenje ortopedskih pomagala, funkcionisanje u svakodnevnim aktivnostima i subjektivni doživljaj pacijenta o stanju nakon operacije kuka. Utvrditi postojanje stepena poboljšanja funkcionalnog statusa pacijenata poslije rehabilitacije u odnosu na onaj prije operativnog zahvata i na kraju rehabilitacije.

Ispitanici i metode istraživanja: Retrospektivno-prospektivna studija je obuhvatila 100 ispitanika treće životne dobi, oba spola, s oboljenjem zgloba kuka koji su operativnim putem liječeni na Klinici za ortopediju i traumatologiju UKCS-a ugradnjom totalne endoproteze. Ispitanici su anketirani prije operacije i nakon ugradnje totalne endoproteze kuka, kao i prije i poslije fizikalnog tretmana koji je proveden u sklopu postoperativne rehabilitacije. Instrumenti koji su korišteni u istraživanju su: SF-36, mHHS, HAGOS i WOMAC.

Rezultati: Prosječna starosna dob ispitanika obuhvaćenih ovim istraživanjem iznosila je $71,45 \pm 6,74$ godine. Primjenom Anova testa nije ustanovljena statistički značajna razlika u starosnoj dobi ispitanika u odnosu na spolnu strukturu, $F = 0.073$; $p = 0.787$. Primjenom hi kvadrat testa ustanovljena je statistički značajna razlika u generalnom zdravlju prije i nakon operacije, $\chi^2 = 128.689$; $p = 0.001$. Ograničenje penjanja uz nekoliko stepenica prije operacije imalo je 67% ispitanika, da bi se nakon operacije taj procent statistički značajno smanjio i iznosio 1% ($p = 0.001$). Analizom problema vezanih za fizičko zdravlje, a na osnovu odgovora dobivenih anketiranjem, svi ispitanici su prije operacije imali probleme vezane za fizičko zdravlje. Nakon operacije, došlo je do statistički značajnog poboljšanja, $p < 0.05$. Analizom boli u kuku/preponama tokom posljednjih mjesec dana tokom obavljanja određenih aktivnosti, prije i nakon operacije i obavljene fizikalne terapije, ustanovljeno je statistički značajno poboljšanje, što je potvrđeno Anova testom, $p = 0.001$.

Zaključak: Iz rezultata našeg istraživanja proizlazi da je kvalitet života osoba treće životne dobi u značajnoj mjeri bolji nakon operacije ugradnje totalne endoproteze kuka, mjereno specifičnim upitnicima, čime je potvrđena radna hipoteza istraživanja. Ovaj rad potvrđuje značaj ne samo operativnog zahvata ugradnje totalne endoproteze zgloba kuka kod pacijenata treće životne dobi nego i značaj dobro organizovane fizikalne terapije i rehabilitacije.

Ključne riječi: kvalitet života, endoproteza kuka, fizikalna terapija.

DISSERTATION TITLE:**Author:** Hadžan Konjo**Mentor:** Prof. dr. Dijana Avdić**Date of defence:** 14.July 2017**DOI:** <https://doi.org/10.17532/DD.2017.03>**ABSTRACT**

Introduction: The use of endoprosthesis of the hip joint is one of the greatest achievements in orthopedic surgery last few decades. Applying artificial joints opened a new era in surgery of the locomotor system, which provides all the successful approaches to solve therapeutic problem. Studies conclude that efficiency can be improved if it is taken into account a number of factors, and those on the side of the quality of life of patients, and those with hand prosthesis. In people with Boles hook functions the same decrease significantly, arthroplasty of the hip or represents significant savings, or good material investment in improving both short and long-term quality of life.

Working hypothesis: Installation of total hip arthroplasty with the elderly leads to a better quality of life, improves the functional and clinical status in the elderly. The combined treatment of physical therapy and physical training gives good results in the reduction of pain in the elderly after mounting total hip endoprosthesis.

Research goals: To investigate whether there were differences in the quality of life of the elderly before and after surgery or total hip arthroplasty. To examine whether there is a difference in the daily postoperative functioning in patients as part of treatment built a total hip endoprosthesis, compared to the time prior to surgery. Examine the intensity of pain, stiffness of the operated hip endoprosthesis and stability, the ability to walk, use of orthopedic devices, functioning in daily activities and subjective experience of the patient on the condition after surgery hip. Determine existence steps of improve the functional status of patients after rehabilitation in comparison to the one before operating surgery and at the end of rehabilitation.

Material and Methods: A retrospective-prospective study included 100 patients elderly, over 65 years, of both sexes with a disease of the hip joint that have been surgically treated at the Department of Orthopedics and Traumatology UKCS mounting total hip. Respondents were interviewed before surgery and after implantation of total hip replacement, as well as before and after the physical treatment which is performed as part of post-operative rehabilitation. The instruments that were used in the study are: SF-36, mHHS, Hago and WOMAC.

Results: The average age of patients included in this study it was $71,45 \pm 6,74$ years. By using Anova test was not statistically significant difference in the age of the respondents in relation to gender, $F = 0.073$; $p = 0.787$. By using chi-square test established a statistically significant difference in the overall health before and after surgery, $\chi^2 = 128,689$; $p = 0.001$. Limit climbing a few stairs before surgery had 67% of respondents to the present after surgery significantly decreased and amounted to 1% ($p = 0.001$). The analysis of problems related to physical health, but on the basis of responses received survey, all respondents were before surgery have problems related to physical health. After the surgery, there was a statistically significant improvement, p

<0.05 . Analysis of pain in the hip/groin during last month during the performance of certain activities, before and after surgery and performed physical therapy, found statistically significant improvement, as confirmed by ANOVA, $p = 0.001$.

Conclusion: The results of our research shows that the quality of life in the elderly is significantly better after surgery or total hip arthroplasty, measured by specific questionnaires, which confirmed the working hypothesis. This study confirms the importance of not only operational procedure of mounting total hip prosthesis in patients elderly and the importance of well-organized physical therapy and rehabilitation.

Keywords: quality of life, hip endoprosthesis, physical therapy.