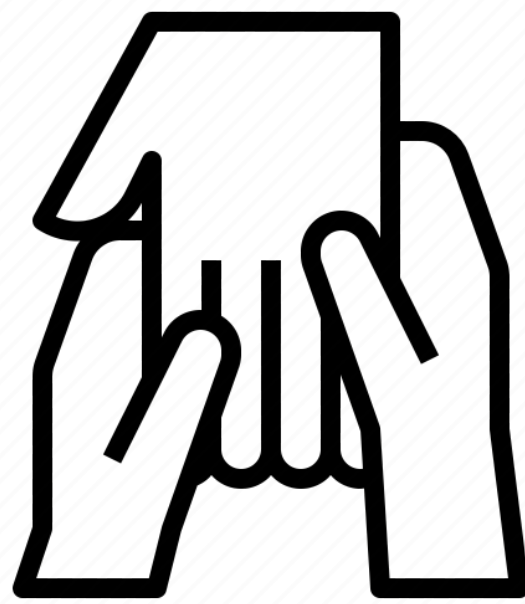


Hand therapy after flexor and extensor tendon repair: a retrospective study assessing predictors of loss to follow-up

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Background and Significance

- Timely and consistent post-op hand therapy is paramount in preventing complications and achieving maximal long-term functionality after hand surgery.
- Loss to follow-up (LTFU) can occur 19-33% of the time.
- Factors: geographic barriers, patient motivation, age, socioeconomic status, education level, documented psychiatric history.



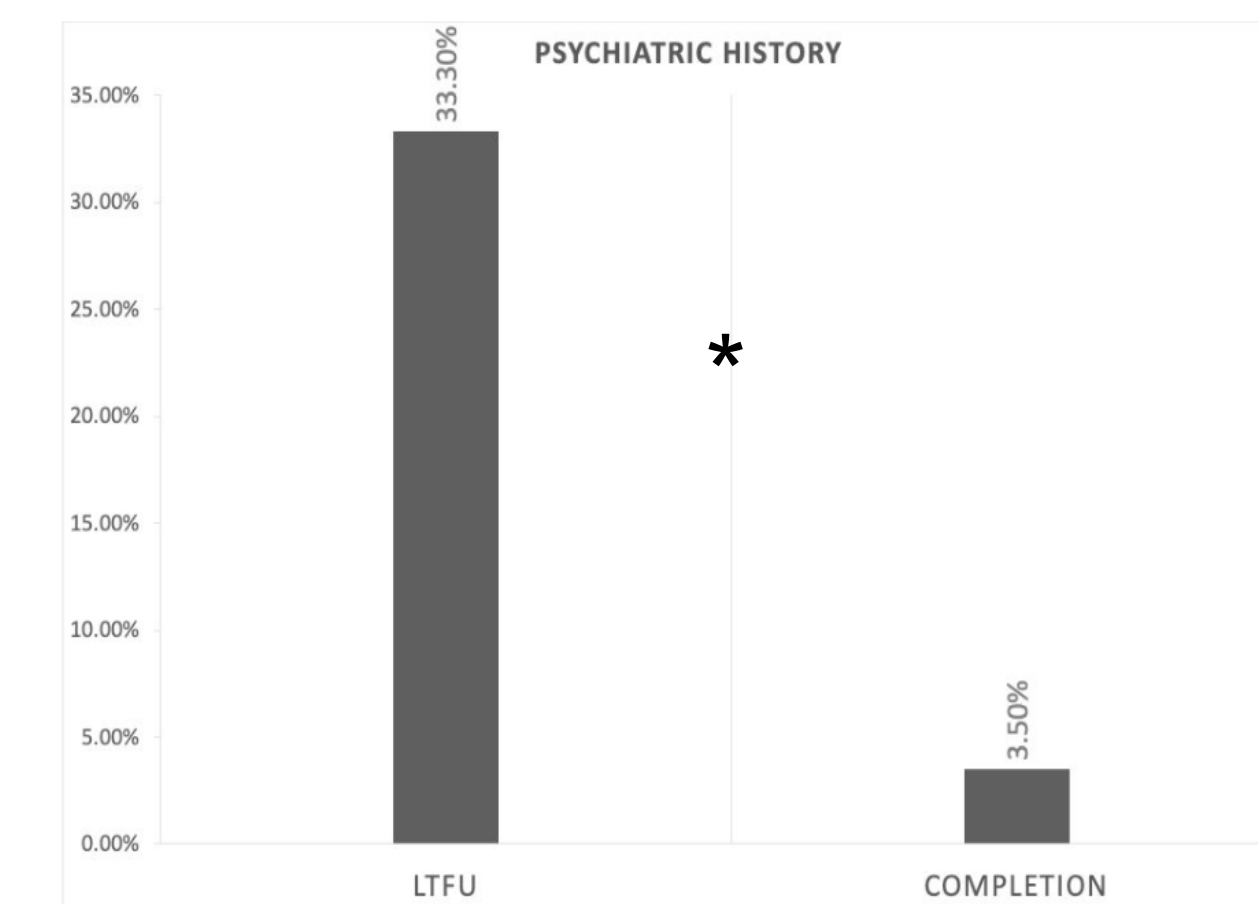
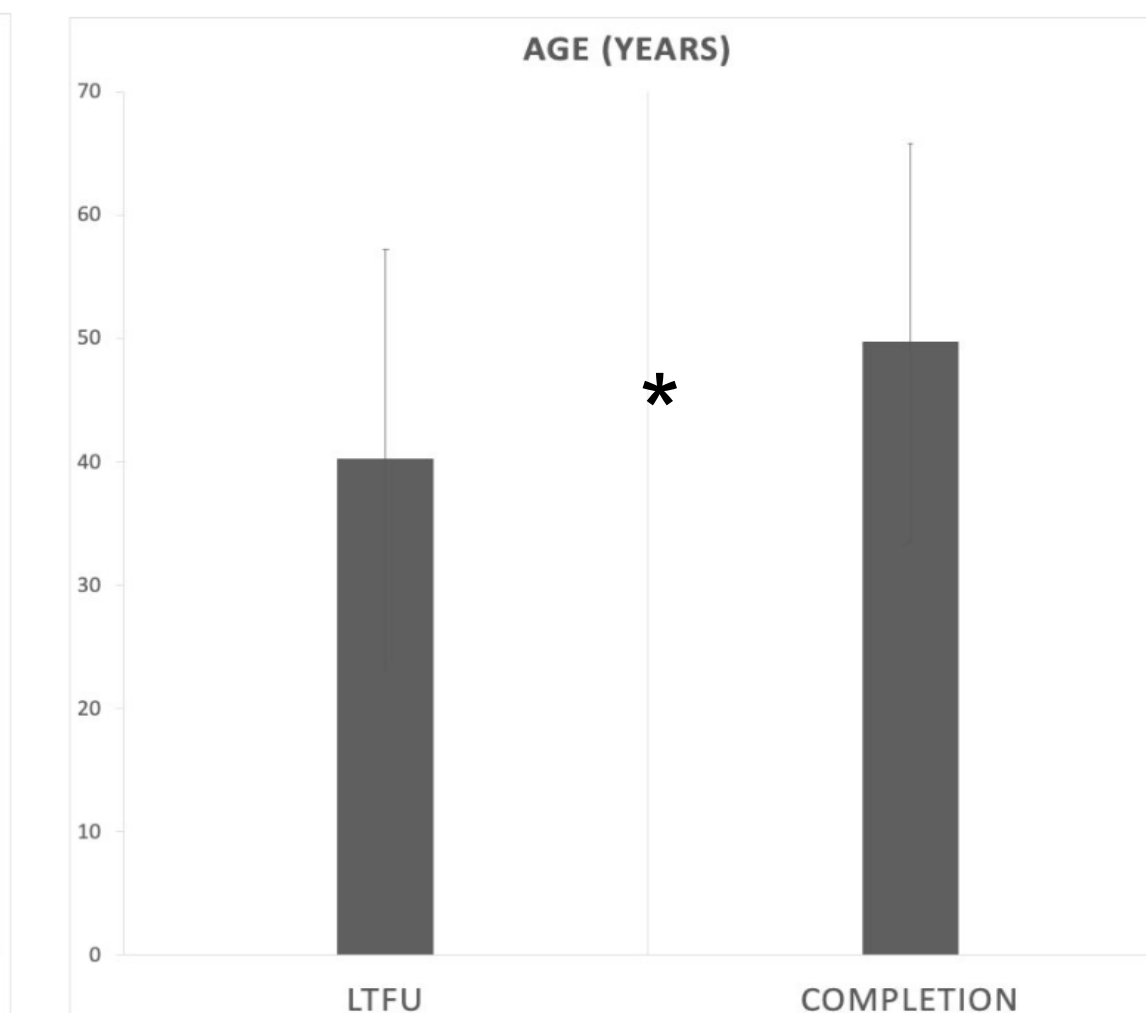
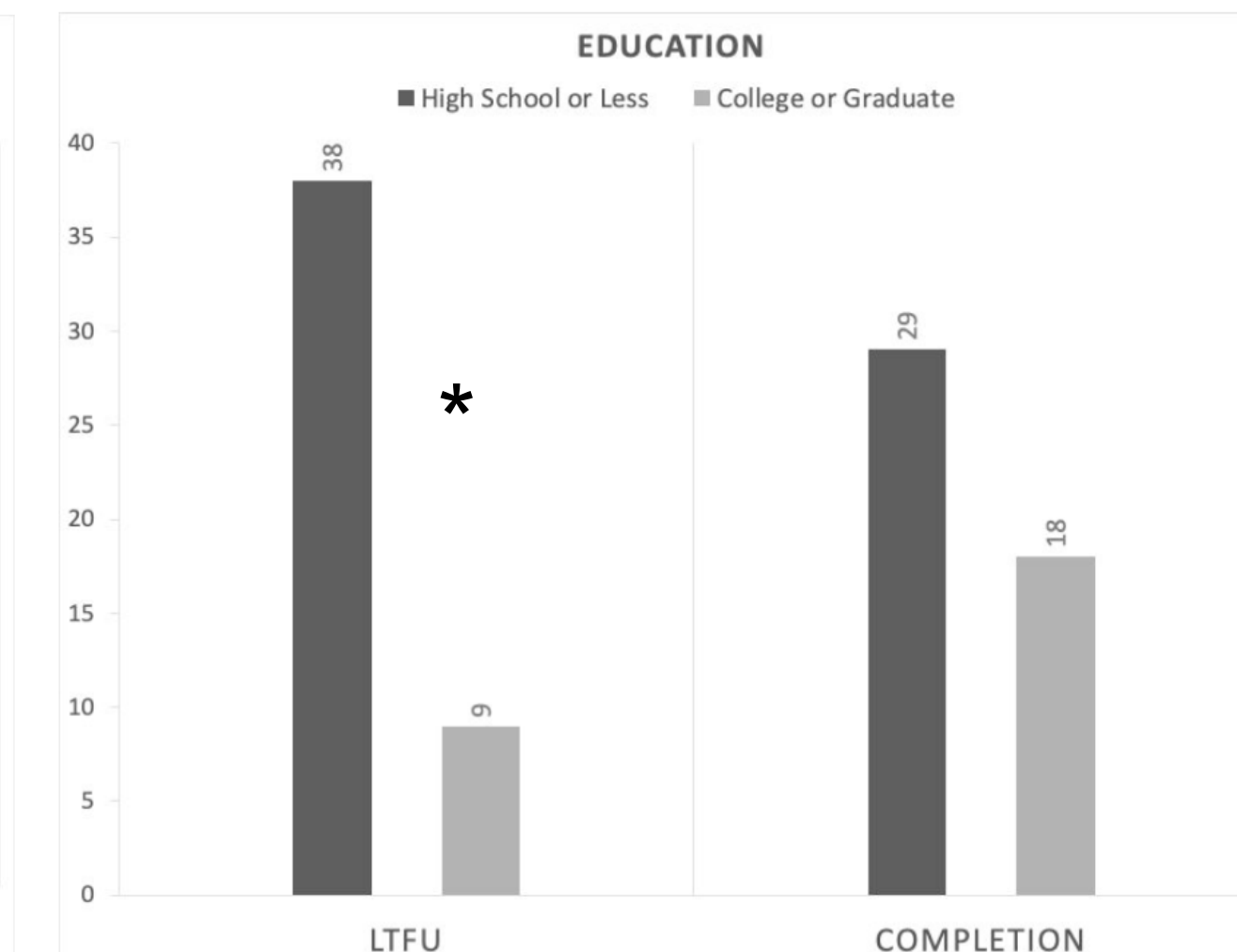
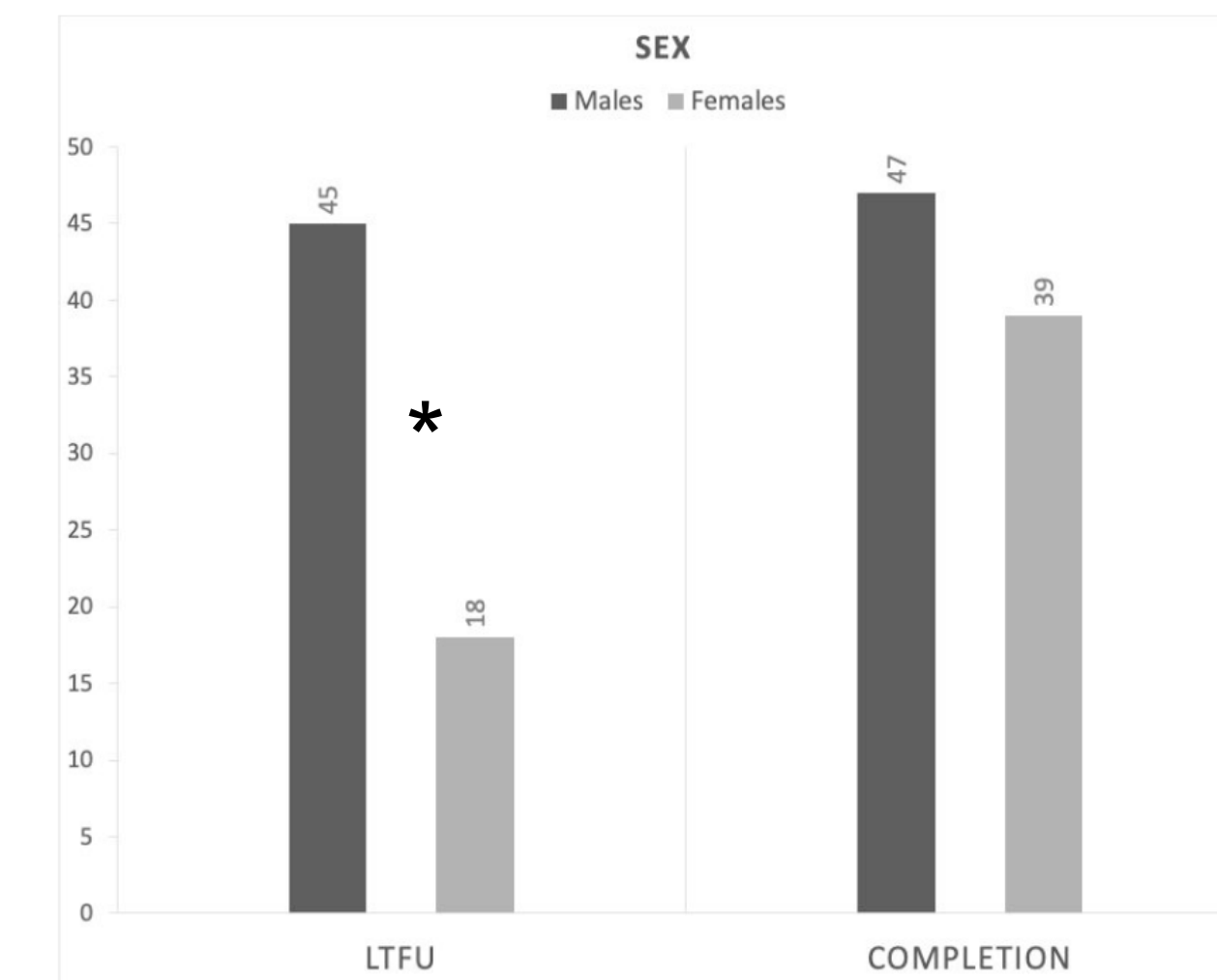
Results

- Of 149 patients, 63 patients were LTFU (rate of 42.3%).
- Significant predictors: male sex, lower educational level, older age, and documented psychiatric history.
- The number of hand therapy weeks suggested by occupational therapy for the LTFU group was not significantly different from the number suggested for the completion group (9.7 vs. 8.9, range: 3-24 weeks).
- On average, LTFU patients completed 5.1 weeks (53% of suggested course; range: 0-19 weeks) before being lost.

Characteristics of Study Participants

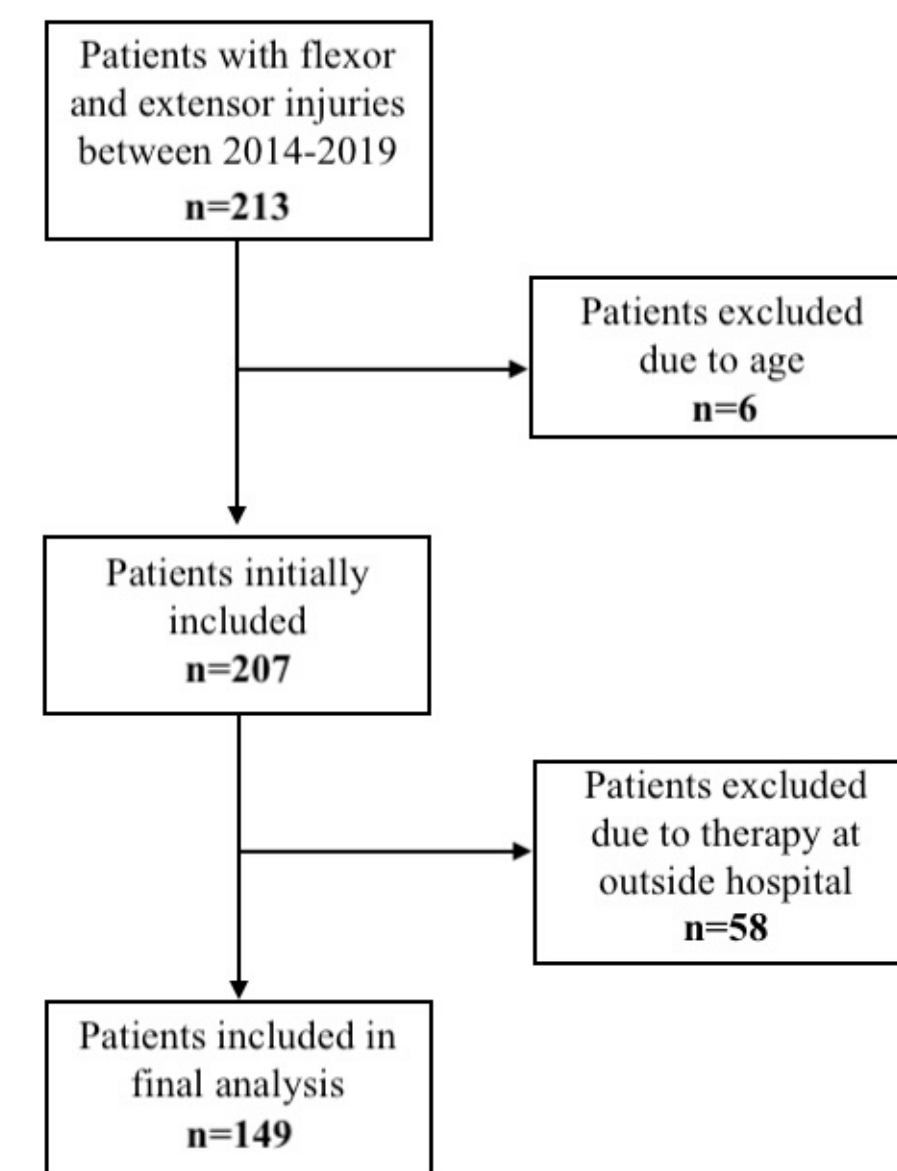
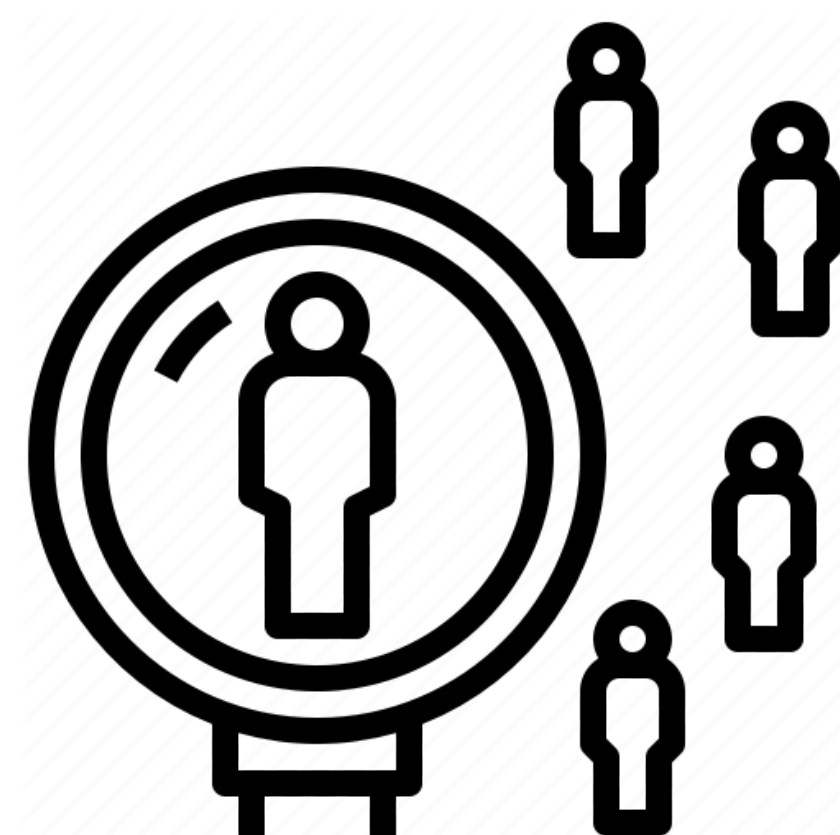
Characteristic	Patients		P-value
	LTFU	Completion	
Number, n	63	86	
Age, years	40.2 (17.0)	49.7 (16.1)	<0.001
Sex, n (%)			0.038
Male	45 (71.4)	47 (54.7)	
Female	18 (28.6)	39 (45.3)	
Language, n (%)			
English	57 (90.5)	78 (90.7)	0.964
Spanish	3 (4.7)	3 (3.5)	0.698
Portuguese	2 (3.2)	4 (4.7)	0.651
Albanian	1 (1.6)	1 (1.2)	0.822
Race, n (%)			
White	46 (73.0)	68 (79.1)	0.391
Black	8 (12.7)	5 (5.8)	0.142
Hispanic	4 (6.3)	6 (7.0)	0.880
Other	4 (6.3)	5 (5.8)	0.892
Multi-Racial	1 (1.6)	0 (0.0)	0.242
Asian	0 (0.0)	2 (2.3)	0.224
Median Income, \$	76,467 (28,778)	70,785 (21,857)	0.178
Insurance, n (%)			
Worker's Comp	11 (17.5)	17 (19.8)	0.223
State	23 (36.5)	29 (33.7)	0.725
Private	26 (41.3)	37 (43.0)	0.832
None	3 (4.8)	3 (3.5)	0.698
Psychiatric History ^a (%)	21 (33.3)	3 (3.5)	<0.001
Education ^b , n (%)			0.043
High School or Less	38 (80.9)	29 (61.7)	
College or Graduate	9 (19.1)	18 (38.3)	
Employment ^b , n (%)			
Unemployed	13 (22.0)	16 (20.8)	0.861
Part-time	2 (3.4)	3 (3.9)	0.876
Full time	44 (74.6)	58 (75.3)	0.922

For Age and Median Income, data are presented as the mean (standard deviation).
^a Included major depressive disorder, post-traumatic stress syndrome, adjustment disorder, and generalized anxiety disorder.
^b Data reported only for patients in which data was available.



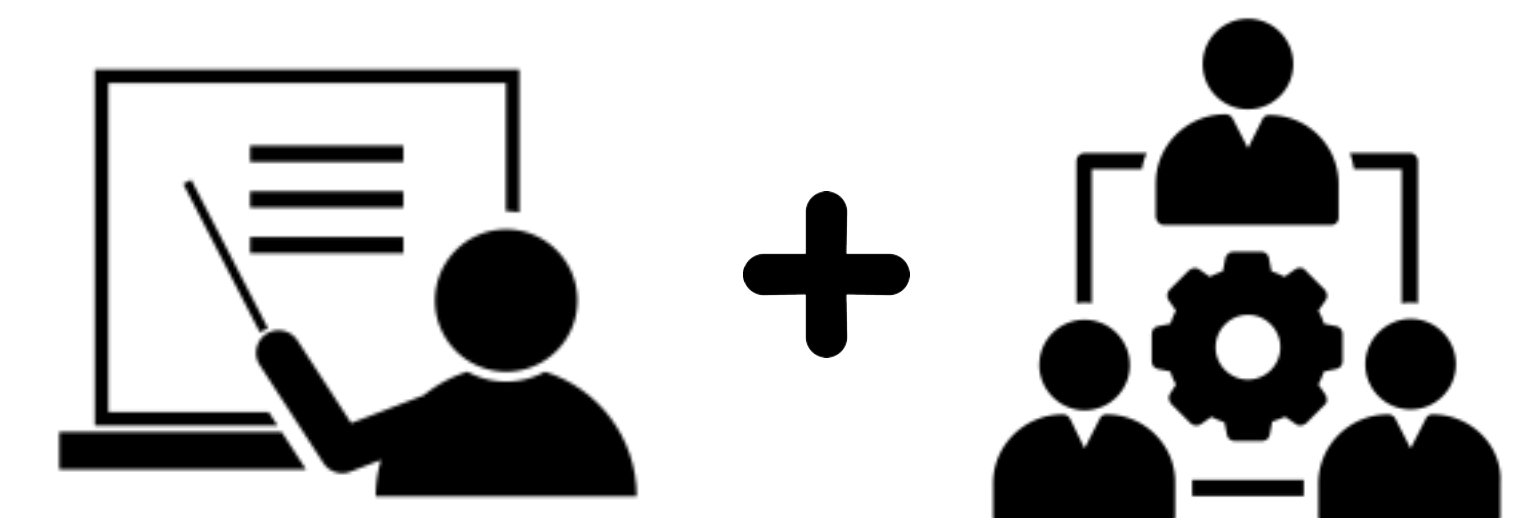
Methods

- A retrospective cohort study.
- Data collected included age, legal sex, race, zip code, language, employment status, education level, insurance, income, distance from hand therapy, and psychiatric history.



Conclusions

- Male sex, younger age, less education, and psychiatric history predict LTFU.
- Increased education and contact, as well as coordinated care between surgeons, PCPs, and mental health providers could help to reduce attrition rates and improve patient care.
- Future studies should assess the functional outcomes of patients LTFU compared to those not lost.



References

- A total of 32 references were used for this paper. Please ask or refer to the manuscript upon publication.