

2019 NEHS Annual Meeting Abstract Submission

ABSTRACT TITLE *	Response rates in orthopaedic hand surgery follow-up questionnaires: which patients participate?
Contact Person Name *	Jonathan Lans
Contact Person Email *	
Contact Person Phone Number *	
Name of who will present abstract at NEHS meeting on December 6, 2019 Please note that the same person cannot present more than one abstract at the meeting. *	Yannick Hoftzier
Please indicate if the presenter is: *	<ul style="list-style-type: none">Not currently a resident or fellow
List full names of abstract authors *	Yannick Hoftzier, Juliette Nierich, Ritsaart F. Westenberg, Jonathan Lans, Rohit Garg, Kyle R. Eberlin, Neal C. Chen

ABSTRACT – should include background information and a description of methods, programs, or practices. *

Introduction: The primary aim of this study was to review the successful response rate to long-term follow-up questionnaires by assessing 12 different orthopaedic hand surgery studies. Secondary aims were to determine the factors influencing reachability of patients, participation, and completion of the questionnaires.

Methods: We included 798 adult patients who were enrolled in one of 12 questionnaire follow-up studies at the Hand and Upper Extremity Service. Studies evaluated patient-reported outcomes for surgical treatment of upper extremity conditions with the use of questionnaires. Each included study used the same enrollment design, which included an invitation letter with the request if the patient would be willing to participate, followed by contacting patients by phone at least 3-times if they did not respond. The response rate was defined as the percentage of the eligible patients that completed the questionnaires. Patients were contacted at a median of 6.6 years (IQR: 3.7–11) following surgical treatment. We performed a manual medical chart review to collect patient characteristics and performed a multivariable logistic regression analysis to identify independent factors associated affecting each rate.

Results: The average response rate was 49% (390 of 798 patients), the average reachability rate was 68% (541 of 798), and the average participation rate was 73% (397 of 541). In multivariable analysis, a shorter time from surgical treatment (OR:0.95; 95% CI, 0.92–0.99; p=0.015) and female sex (OR:1.43; 95% CI, 1.03–2.0; p=0.031) were independently associated with higher response rates. On the contrary, multiple researchers contacting patients was independently associated lower response rates (OR:0.51; 95% CI: 0.37–0.71; p<0.001).

Conclusion: Patient questionnaire studies evaluating outcomes after upper extremity surgery can expect an average response rate of 49% when using the using mail and phone calls to enroll patients. Studies assessing at long follow up, or those including a large proportion of males have lower response rates, which is important to consider when designing a study. Lastly, when executing a follow-up studies, having one researcher execute the study may improve response rates.

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