

# Benchmark for the Quality of Care

## Burden of Musculo-Skeletal Conditions in Germany in the Bone and Joint Decade

LISBON – Musculo-skeletal conditions are common throughout Europe and their impact is pervasive. This has been recognized by the UN and WHO with the endorsement of the Bone and Joint Decade.

The WHO's "Health 21: The Health for All Policy Framework in the WHO European Region" identifies musculoskeletal conditions as a target, but at present national health-care priorities in most countries do not address these issues. One aim of the activities in the Bone and Joint

Decade is to identify the burden of musculo-skeletal conditions in the individual countries, including health care utilization and associated costs.

As part of a project of the German Network of the Bone and Joint Decade data were collected from governmental bodies, health insurance companies, pension funds, hospital



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discharge reports and other sources for the year 2002.

According to the hospital discharge reports 17.8% of all acute hospital days were due to musculo-skeletal conditions (MSK) (1.621 admissions/100.000 inhabitants) and injuries (1.985/100.000), with fractures, joint disorders and back problems being the most frequent reasons for admission. During the

period 1994 to 2002 the overall number of all hospital admissions has increased by 15%, while the number of admissions for musculoskeletal conditions has increased by 35% and for joint disorders by 58%.

63% of the patients admitted with musculoskeletal conditions underwent surgery, resulting in about 2.2 million procedures. About half a million patients were treated for fractures: 210.000 with ORIF, 125.000 with closed reductions and in 160.000 patients the implant material was removed. In addition, there were

330.000 arthroscopies, 300.000 joint replacement surgeries (170.000 THR, 90.000 TKR, 23.500 THR revisions and 8.500 TKR revisions), 150.000 spine surgeries and 65.000 amputations.

40% of all inpatient rehabilitation treatments were caused by musculoskeletal conditions. 325.000 patients were admitted for musculoskeletal conditions, with spine problems (75%) and joint disorders (19%) being prominent. Another 230.000 patients underwent inpatient rehabilitation treatments following surgery (TJR, spine, trauma).

In the outpatient segment, 27% of all patients visited during a 12 month period an orthopaedic surgeon or a rheumatologist. In addition, 37% of all GP consultations were due to musculo-skeletal complaints.

Muskuloskeletal disorders and injuries were also responsible for about 40% of all days lost from work, with MSC causing 27% (133 Mio. days) and back pain and spine problems resulting in nearly two-third of these lost working days. Injuries are responsible for another 13% (63 Mio. days), with 50% of these injuries suffered at the work place. However, most interestingly 5% of all the cases were causing 40% of all days lost from work.

25% of all early retirements were due to these conditions, with musculo-skeletal disorders being dominant (22.6%) and back problems once again the most prominent group.

The overall direct cost for musculo-skeletal conditions in 2002 in Germany was about 40 Billion Euro, with back problems responsible for about 50%, and joint problems for another 30%. Indirect costs are adding up to these costs for society and will be enormous considering the high percentage of MSC responsible for days lost from work (40%) and early early retirement (25%), not to mention the need for familiar help and other intangible costs.

Muskuloskeletal conditions are the major cause of morbidity in the German society and substantially influence health and quality of life, with enormous cost to health systems. Considering the demographic changes along with changes in lifestyle, which will increase this burden, immediate strategies have to be developed to address these problems, to prevent the diseases and to allow for early and appropriate care. The avoidable burden of disease, defined as the difference between the actual burden and what can be achieved by state-of-the-art treatment, will be the benchmark for the quality of care in the individual countries. ■

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