



UPMC Magee Women's Hospital Bone & Joint Center: Gender Specific Research

CUSTOMER OVERVIEW

Bone and Joint Center

UPMC Magee Womens Hospital
Pittsburgh, PA, USA

- Located in a world-class women's hospital, this program adds value to the larger organization through treatment of arthritis and hip, knee, and back pain.
- At the beginning of this project, the Bone and Joint Center was already performing in the top tier with programs similar to it.
- The program utilizes a patient-centered approach to increase efficiency, reduce cost, and maintain high patient and family satisfaction.

The Bone and Joint Center (BJC) at UPMC Magee-Womens Hospital and goShadow partnered to do research on patient sentiment towards having total joint replacement surgery and non-operative treatment. This data was used to validate disparities between genders in various aspects of bone and joint health that was observed in the literature. By analyzing a combined 139 patient responses from both males and females we were able to highlight several themes that appeared in responses regularly. Ultimately, these responses jumpstarted the development of patient-centered programs such as the Center for Bone and Joint Health (CBJH), which uses this patient-reported data to deliver coordinated, individualized care.



139 total responses between 2020 and 2021. 84 were female and 55 were male.



42.31% of males reported delaying treatment evaluation as compared to 57.32% of females reported delaying evaluation.



When asked "What are your barriers to doing exercise?", 61.80% of total responses were because of joint pain.

“Have seen other people that have knee replacements and have had tremendous results! How much time approx would this entail/recovery each knee?”

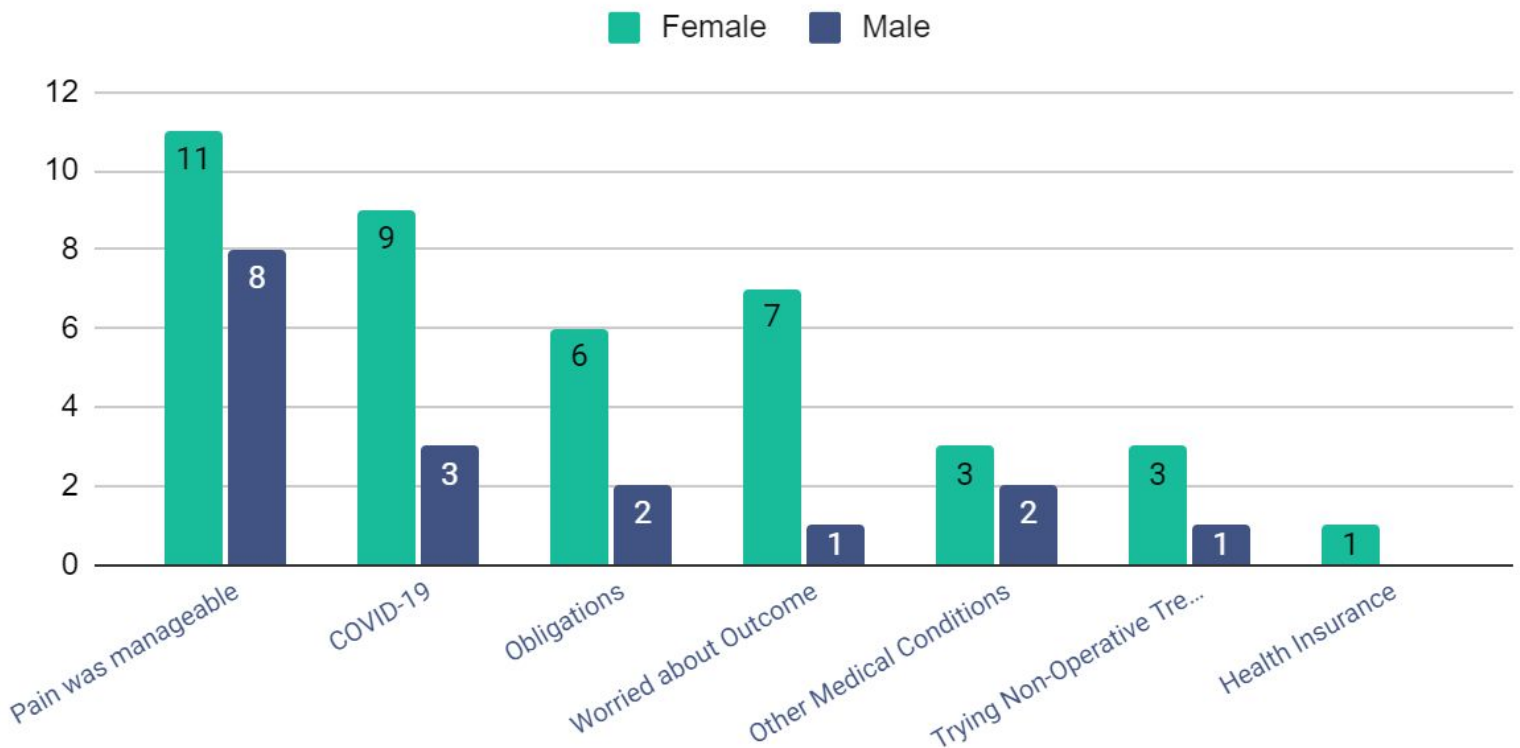
A patient at the BJC when asked to "Describe the type of information that you would like to know about hip and knee arthritis, prevention, non-operative treatment, and a total joint replacement if needed."



Survey Results

The goShadow team surveyed 139 patients of the BJC to better understand gender disparities and how that might impact care plans and perceptions.

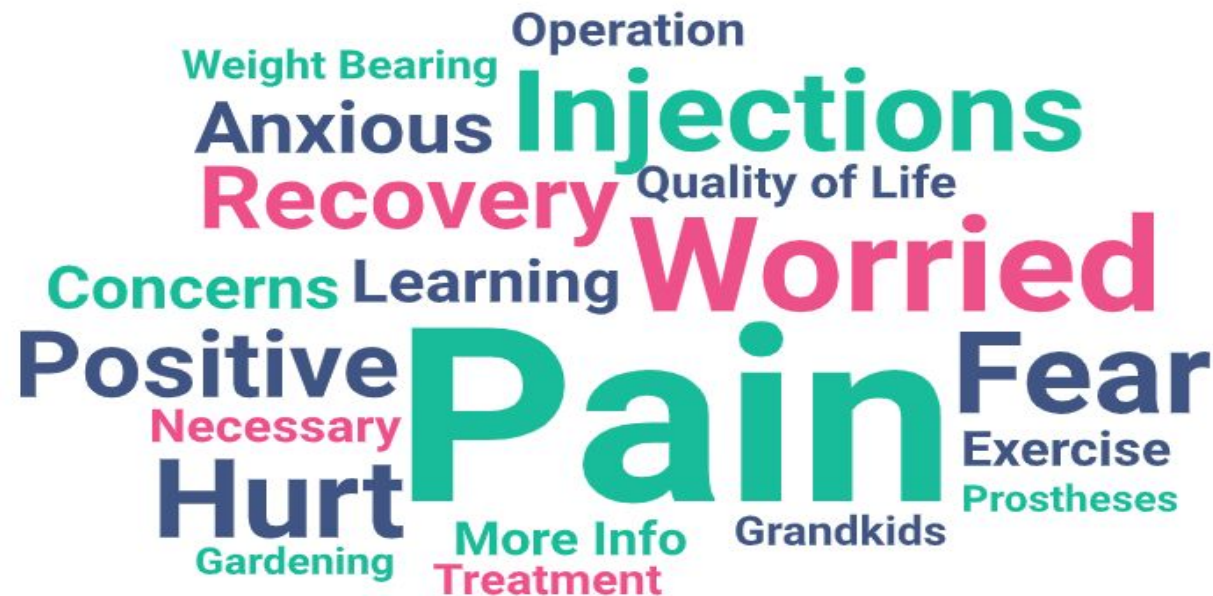
If you have delayed care, why have you delayed evaluation or treatment?



Based on the results of the survey demographics and responses to the questions presented, “Have you delayed an evaluation or treatment?”, 42.31% of males reported delaying treatment evaluation and 57.32% of females reported delaying evaluation. The question was followed up with “If yes, why have you delayed evaluation or treatment?”. Responses related to the pain being manageable were represented equally by both female and male patients. However, concerns with COVID-19, personal obligations, and uncertainty played a larger role in delaying care with female patients. Understanding the underlying reasons why care may be delayed helped the care teams to craft patient education and the intake processes to address individual concerns and to promote coordinated care by listening and acting with the patients’ needs in mind.

In their Words: 139 patients

Do you have any worries or concerns about any part of the process?



Conclusions

Through analysis of goShadow's research, there are disparities in the way that men and women approach receiving preventative and operative treatment that they may need. A higher percentage of women delay or even avoiding consultation with their physicians. Reasons identified from this study are: pain being manageable, fears related to COVID-19, personal obligations (being a caregiver to others), and fear of adverse outcomes.

This data highlights the importance of creating a personalized care experience at the Bone and Joint Center and Center for Bone and Joint Health. While there are commonalities between patients by gender and age, each person desires a unique treatment plan. Improving flexibility of scheduling and providing customized patient education material addresses common reasons for delaying care. goShadow continues to iteratively collect, analyze, and aggregate an organization's process and experience-level data so that the voices of patients and care teams are acted upon immediately. By possessing this data, teams come together to co-design more ideal and agile care experiences that deliver clinical outcomes and operational value for all stakeholders.

Build your own surveys to learn "What Matters?" to your patients using our free [toolkit](#)

Contact us @ <https://www.goshadow.org/contact> to jumpstart your improvement journey

