

Beware of Hip Fractures in the Elderly [Letter]

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Dear editor

With the increasing aging of the world, the care of the elderly has attracted more and more attention from doctors, especially the diseases caused by aging, including osteoporosis, which can easily lead to serious consequences. We recently read the study published by Bermejo¹ et al in Clin Interv Aging, which was about hip fractures caused by osteoporosis in centenarians. They conducted a large amount of detailed research, and a total of 25,938 patients aged ≥ 75 years were included in the study. The article conducted a clinical and demographic study on fracture patients aged 75 and above and obtained good results. While we commend the valuable contribution of this research, we also offer some constructive suggestions for further improvement.

First, the article included a large number of cases and conducted controlled studies in different age groups. One point that was not mentioned in the article but we are very interested in knowing is the background and causes of the disease in these elderly people, and whether different age groups may have different disease onset and prognosis due to care reasons? Will different age groups experience different levels of fractures due to the number of complications? Elderly patients generally have osteoporosis and are prone to fractures. If other diseases occur,² is the severity related to care? Are there any reasons for caregiver errors in these fractures caused by aging? Can we suggest that researchers create some quality of life assessment scales?

Secondly, the article suggests that there are more female participants in the enrolled cases,³ as they are all long-lived elderly individuals. So, are these deviations related to the lifespan of men and women? Has the deviation of the population base been corrected?

Thirdly, the conclusion states that centenarians are more prone to intertrochanteric fractures and the survival rate after one month is statistically analyzed. We also want to further understand whether elderly patients who have survived the one month postoperative period have a higher and better quality of life, and whether surgery results in a higher quality of life compared to non-surgical patients? Is the choice of surgical method related to prognosis⁴? Will choosing conservative treatment lead to more serious outcomes or is it equivalent?

By improving and supplementing the above methods, the reliability of the study can be enhanced, and the relationship between different ages and hip fractures can be better explained and analyzed. In addition, other key factors affecting elderly people after fractures can also be revealed. This analysis can not only increase the depth and breadth of research but also contribute to a more comprehensive and scientific understanding of fracture formation in the elderly. In summary, Bermejo et al's study is an important step in understanding the relationship between hip fractures and postoperative outcomes in elderly individuals. Our suggestion is only to further improve an already excellent research. We look forward to future authors making more inspiring contributions.

Ethics Statement

The author has confirmed that the approval of an institutional review board was not required for this work. The author also confirms that informed patient consent was not necessary for this work. The authors affirm that they have read the journal's guidelines on ethical publication and affirm that this work is consistent with those guidelines.

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Disclosure

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