

S D Deo Research Presented at **National & International Presentations** over the past few years.

2016

Williams L, Culwick C, Deo S. Risk Factors for Persistent Pain After Total Knee Replacement Confirmed by Use of Patient Pain Diary. British Pain Society, Annual Scientific Meeting Harrogate May 2016.

In a nutshell: we've identified and quantified differences in pain between typical and atypical pain patients, with the 2nd group having more severe post-operative pain.

Deo S. Differences Between Pain Between PKA & TKA Patients presented by S Deo at the Oxford Partial Knee 40th Meeting, Heythrop Park, Oxford 2016.

In a nutshell: our pain diary confirms up to 40% of patients have some form of atypical pain at the time of their knee replacement surgery and this affects early post-op recovery.

Vaserhelyi F, Alexander M, Melton J, Deo S. Validation of the pivot apprehension test as a pain-free test in assessing anterior cruciate integrity. British Orthopaedic Association Congress, Belfast 2016.

In a nutshell: in a clinic setting apprehension is as sensitive and specific as the formal pivot shift test.

Expert-Panel Scoring of Post-Operative Radiographs: An Important Quality Assurance and Quality Improvement Tool. British Orthopaedic Association Congress, Belfast 2016.

In a nutshell: our methodology is worthwhile and a useful tool for validating quality of implantation within a department.

Williams L, Culwick C, Deo S. Differences in pre-operative pain factors affect early post-operative pain. British Orthopaedic Association Congress, Belfast 2016.

In a nutshell: confirms differences in pain levels in patients with different pain types.

2015

Kareem Elsofary, Tamer Kamal, Sunny Deo, Jan-Herman Kuiper. The Swindon Hip Complexity Score Validation. International Combined Meeting BHS-SIDA, Milan 26-27 Nov 2015.

In a nutshell: the 4 part clinical complexity classification I devised back in 2004 works in an equivalent fashion in another department

Deo S, Rolton D, Lotz B, Ahmed A, Jhaj J, Brunton L. Analysis of payment for total knee arthroplasty. Breaking the code in remuneration for knee arthroplasty. British Orthopaedic Association Congress, Liverpool Sep 2015

In a nutshell: there are wide discrepancies which cannot be tracked on the basis of rationality or logic, i.e. which are random, which produces financial loss to our Orthopaedic department.

Deo S. Implications and impact of complexity and the principles of complexity science in clinical orthopaedic practice. British Orthopaedic Association Congress, Liverpool Sep 2015

In a nutshell: we ignore the principles of complexity science at our peril, and we have done so to a greater extent thus far.

Deo S, Gopinath P, Rolton D. Analysis on the effects of body mass index and clinical complexity on outcomes following total knee replacement surgery. British Orthopaedic Association Congress, Liverpool Sep 2015

In a nutshell: clinical complexity is a far greater cause for complication and /or poor outcome than BMI, further confirming that BMI alone shouldn't be used to ration joint replacement surgery.

Vasarhelyi F, Arany L, Kiraly Z, Deo S. Twelve year review of necrotising fasciitis in GWH, Swindon. Magyar Ortoped Tarsasag & Magyar Traumatologous Tarsasag Congress, Sarvar, Jun 2015

In a nutshell: this is a potentially life threatening condition which much be identified & treated promptly. The LRINEC score is useful and incidence may fluctuate suddenly.

Kiraly Z, Vasarhelyi F, Palmar A, Deo S. The painful stiff unicompartmental knee replacement, evaluation of arthroscopic assessment. Magyar Ortoped Tarsasag & Magyar Traumatologous Tarsasag Congress, Sarvar, Jun 2015

In a nutshell: this is a useful technique which may prevent revision of some implants, improve function, and suggest scar tissue as a cause of pain in a proportion of UKR patients.

Rolton D, Jhaj J, Lotz B, Ahmed A, Brunton L, Deo S. Failure of The UK Coding System to Correctly Identify Case Complexity in Total Knee Replacement. [Poster] Surgery. European Federation Orthopaedic & Trauma Societies, Prague May 2015

In a nutshell: traditional UK OPCS coding comprehensively fails to identify patients with clinical complexity making it likely that trusts are losing income due to this

Rolton D, Lotz B, Ahmed A, Jhaj J, Deo S The cost of a deficient coding system for knee arthroplasty surgery in a UK district hospital setting. BASK, Mar 2015

In a nutshell: traditional UK OPCS coding comprehensively fails to identify patients with clinical complexity making it likely that trusts are losing income due to this

2014

Salma Chaudhury S, Williams D, Jhaj J, Deo S. What Really Happens During The Golden Hour And Beyond To Trauma Patients Managed In District General Hospitals In The United Kingdom? [poster]. EFORT (15th Meeting of the European Federation of Orthopaedic & Trauma Societies) London Jun 2014

In a nutshell: the majority of our patients being trauma called and trauma alerted take over an hour to get into us, with a trend for increased times, meaning we see fewer patients in the golden hour.

Argyropoulos M et al. Knee Arthroplasty With A Medial Rotating Total Knee Replacement. A Comparison Clinical Outcome Study With 5 Year Follow-Up, [poster]. EFORT (Meeting of the European Federation of Orthopaedic & Trauma Societies) London Jun 2014.

In a nutshell: The medial rotating knee performed slightly better in terms of Oxford Knee Score (OKS) compared to a matched group of Triathlon patients at 5 years.

Deo S, Lowdon IMR. Seasonal Variation In Hip Fracture Mortality Rates In The Elderly, Analysis Over A Nine Year Period, Case Of Need And Methodology For Further Analysis. [poster]. EFORT (15th Meeting of the European Federation of Orthopaedic & Trauma Societies) London Jun 2014.

In a nutshell: there are wide fluctuations in mortality on a seasonal basis, worst in winter or early spring, within an overall reducing mortality trend. this is likely to be multifactorial and further investigation is needed (lines of investigation suggested).

Jonas S et al, Deo S. Five Year Functional Outcomes Of Total Knee Replacement For Failed Unicompartmental Replacement; A Matched Pair Cohort Comparative Study With A Primary Total Knee Replacement Patient Control Group [poster]. EFORT (15th Meeting of the European Federation of Orthopaedic & Trauma Societies) London Jun 2014. Also published in the journal Knee, 2015.

In a nutshell: revision of uni-knee to a total knee replacement is frequently not a benign procedure with a much higher chance of requiring stems and augments and slower recovery.

Shah R, Jonas SC, Deo S. Medium Term Morbidity and Mortality Following Total Knee Replacement Surgery in Patients with Complex Arthritis Patterns And Comorbidities. A Matched-Pair Cohort Analysis. [poster]. EFORT (15th Meeting of the European Federation of Orthopaedic & Trauma Societies) London Jun 2014.

In a nutshell: our most clinically complex cases have a significantly higher chance of major complication and slower recovery at the 1 year mark when PROMs are undertaken.