

HOLLAND BONE AND JOINT PROGRAM NEWS

Spring/Summer 2019



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Helping patients get home sooner as they feel they are ready

John Roby, 67, wanted to get back to living as soon as possible after hip replacement surgery. He did just that, leaving the Holland Centre on the second day after his operation.

I played at an event on Valentine's Day, then had my surgery the next day," says John who is a composer and pianist. Two weeks after his surgery he was back in his home studio working on his musical that is now in production. "Five weeks later, I did my first – after surgery - performance."

"I am glad I got my hip replaced. Walking is one of my main exercises. I have a smart watch and I'm used to doing 10,000 steps a day. When my hip started to hurt,

I was down to 5,000 steps," says John. "As I began to lose my hip function, I was worried."

John had been referred to **Dr. John Murnaghan**, an orthopaedic surgeon in the Holland Bone and Joint Program who performed joint replacement surgery on his right hip.

John was also a participant in the Accelerated Care Pathway approach at Holland Centre. For some patients undergoing their first knee or hip replacement, this approach helps them feel fully equipped and comfortable with going home as quickly as they feel they are ready, Dr. Murnaghan says.

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Our newsletter offers updates on clinical services, research, education and staff activities. We'd like to hear from you! Please send story ideas or articles for review to: natalie.chung-sayers@sunnybrook.ca

Dr. Murnaghan who is also the medical director of the Holland Centre, is part of an interprofessional committee who have revisited patient care processes related to anaesthesia, nursing, surgical care and rehabilitation to create ways to support patients being home as early as a day or two after surgery.

Supports include providing patients with education with an occupational therapist during Pre-Op Clinic about how to manage care after surgical stay and how to safely do activities of daily living. Patients are also equipped with comprehensive guides also available online, that depict evidence-based and recommended exercises to help patients gradually resume an active lifestyle.

“I felt comfortable leaving the hospital the second day,” says John. “The guides they give you, are very supportive.” John’s care team provided him with details

and advice about activities after hip replacement, which is included in the Holland Centre’s *A Guide for Patients Having Hip or Knee Replacement*.

“The physio [therapist] highlighted the exercises I should do and recommended I do them 30 to 40 minutes twice a day, or three 20-minute sessions a day.”

“Every day I’m getting better. I feel like I’m getting stronger. I can extend my legs a little further. I really want to get back to full speed, but I am still being very careful.”

John attended physiotherapy classes at the Holland Centre. “I also got advice from the therapist about limitations. But also what I can do ... and likely do more of!”

**“I felt comfortable leaving the hospital the second day,” says John.
“The guides they give you, are very supportive.”**



Conversations with Patients

“This initiative is one more way we are evaluating how we can further improve the patient care experience and the delivery of care,” says **Lindsay Crawford**, Partners in Care Council co-chair, and patient transition coordinator at the Holland Centre.

Care teams have conversations with patients recovering in the hospital to gather feedback about elements that contribute to their positive care experiences, such as listening, empathy, and acting on or helping to facilitate requests.

The idea is to gain a greater understanding of common themes flowing from these conversations and to continue to translate them into quality improvements.

Teams will also be having conversations with patients returning to the Holland Centre for their follow up visit Lindsay says, with the goal to further enrich perspectives of the care experience.



Ensuring the Patient Voice

The Holland Bone and Joint Program Partners in Care Council shares ideas and recommendations to improve the care experience for patients and families. They also provide advice on related resources and services across the program. Based at the Holland Centre campus, the Council is made up of patient and family advisors and staff who volunteer their time to meet several times a year.

“It is a valuable experience to be able to provide feedback, and to try help bridge the language between care teams and patients,” says Rachel Kagan, who joined the group last January.

In 2016, she had to have her hips replaced due to a juvenile rheumatoid arthritis condition. “With my first hip replacement, even though I had a great care experience, I had a challenging time. That’s because I thought hip replacement worked like magic. I soon realized you have to work at it. You have to do the exercises. It was a wake up call as to my role in my own recovery,” she says.

“I want to help others understand their role in their own recovery, and to ensure they have access to what they

need to know – the types of questions to ask about their surgery, recovery, physio, follow up – and to receive that information from the care teams, in a way that is easy to understand.”

Since the Council launched two years ago, the group has advised on many projects including six education resources such as guides to help prepare for surgeries and achieve optimal recovery. Members have made recommendations on two patient and family communication tools and advised on ways to introduce patients to new technology tools located in the waiting areas of the Holland Centre’s Outpatient Department and Pre-Admission Clinic.

The Council is always looking for new members and is exploring more ways to engage in positive contributions.

For more information about the Partners in Care Council, please email PartnersinCare@sunnybrook.ca or call 416-967-8538

Holland Bone and Joint Program: photo highlights

Photos by Kevin Van Paassen and Doug Nicholson



A Harmonious Outcome



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I felt nervous at first about this surgery, because I have known people whose rotator cuff repairs were painful for a long time, and were either only partly successful or tore again shortly after recovery. I decided I would go for it though because I knew I was in good hands. The thought of never playing [the piano] again was unbearable. – Almeda

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Almeda Marshall, 69, is regaining harmony in her life and celebrating the joys of knowing she'll be able to make music again – this time, pain-free.

She is a retired special education and music teacher. She studied music at the Royal Conservatory and the University of Toronto and now volunteers as an accompanist at church, and for a local children's choir.

She endured shoulder and arm pain, ironically, doing what she loves most – playing the piano and flute.

What hasn't helped is that she has had injuries throughout her life. At the tender age of 10, Almeda was helping her Dad build the dock at the family cottage.

She unfortunately took on a heavy load and experienced a serious shoulder injury, which was for many years deemed surgically inoperable and was never fully diagnosed.

“After that time, my piano teachers would push my shoulder down during lessons and comment it was strange that it was only that shoulder that rose up, as I played,” she recalls.

Almeda was referred to **Dr. Patrick Henry**, by a surgeon who replaced her knees. Dr. Henry, an orthopaedic surgeon in the Holland Bone and Joint Program, specializes in complex reconstruction for shoulder disorders and minimally invasive arthroscopic techniques.

Dr. Henry performed a massive repair. Three of four tendons in her shoulder

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Award Highlights:

Dr. Vikas Bansal, hospitalist: Best Poster Awards recipient at this year's Clinical Impact Through Innovation ways to manage responsive behaviours in patients with cognitive challenges, for improved staff and patient safety.

Kan Ketheeswaran, HVAC Technician

Fatima Vieira, Patient Administrative Associate: 2019 Bertin Awards for Excellence in Customer Service

Research Highlights:

The Holland Bone and Joint Program continues to:

- **help translate research into clinical application:**

Eighteen peer-reviewed publications including:

Jessica Widdifield, scientist, is first author on *Associations between Methotrexate Use and the Risk of Cardiovascular Events in Patients with Elderly-onset Rheumatoid Arthritis*. *J Rheumatol*. 2018 Dec 1. This article was listed in the University of Toronto, Institute of Health Policy and Management Education's top ten list for most newsworthy stories of 2018.

Diane Nam, orthopaedic surgeon and associate scientist, is senior author on *A two phase regulation of bone regeneration: IL-17F mediates osteoblastogenesis via C/EBP- β in vitro* which also included co-author Cari Whyne. *Bone*. 2018 Nov; 116:47-57.

Meaghan O'Reilly, scientist, is co-author on *Analysis of Multifrequency and Phase Keying Strategies for*

Focusing Ultrasound to the Human Vertebral Canal. *IEEE Trans Ultrason Ferroelectr Freq Control*. 2018 Dec;65(12):2322-2331.

- **succeed in grant funding to conduct new research or to expand on existing work**

Stephen Choi, anaesthesiologist and scientist, is a co-investigator on a Physicians' Services Incorporated Foundation, Health Services Research Grant for *Functional Improvement Trajectories after Surgery Study (FIT): A Multicentre Prospective Cohort Study to Evaluate the Incidence, Trajectories, Risk Factors, Impact and Healthcare costs Related to Significant new Disability after Major Elective Surgery*. \$244,500 (Jan 2019 2yrs.) principal investigators: Mclsaac D, Wijeyesundera D, Juni P.

Jacques Lee, emergency medicine physician and scientist, is a co-investigator on *Quantity of Opioids for Acute Pain and Limit Unused Medication (OPUM study)* principal investigator: Raoul Daoust. CIHR - project grant \$742,051 Oct 2018 - Sept 2022.

Cristian Renteria, physiotherapist is principal investigator, with co-investigators **David Wasserstein**, **Mithura Anandarajah**, **Allison Kamino**, **Sebastian Tomescu**, and **Helen Razmjou**, on *Pattern of recovery and management strategies of workers with meniscus and ligamentous knee injuries*. 2018 PBRI (Practice-Based Research and Innovation) Seed Grant Program (Feb 2019 – 2 yrs.)

Patrick Henry and **David Wasserstein**, orthopaedic surgeons and affiliate scientists, are co-investigators on the grant: *The DECIPHER Study: Determinants of Function and Clinically Important outcomes in Proximal Humerus Fractures in the Elder Population: A National Cohort* – A Canadian Institutes of Health Research - project grant for \$875,925 (Jan 2019 5yrs.) principal investigator: Schemitsch, E.

Meaghan O'Reilly, scientist: Ontario Ministry of Research, Innovation and Science Early Researcher Award (1 year, \$190,000) for her project entitled: *Therapeutic Effects of Ultrasound in the Spinal Cord*. She is also the recipient of the New Investigator Award from the Terry Fox Research Institute, of \$450,000 over three years, to support her research in *Bubble-Mediated Therapy for Metastatic Disease in the Spinal Cord*. She is the recipient of a Canadian Institutes of Health Research Grant Award to support her research in *Ultrasound-Induced Bioeffects and Drug Delivery in the healthy and pathologic spinal cord*.

Cari Whyne, scientist, **Robin Richards**, **Helen Razmjou**, and **David Burns** received a Collaborative Health Research Projects (CHRP) grant for their work: *Shifting the Paradigm in Home Physiotherapy: Implementation and Implications of Adherence Monitoring with Artificial Intelligence (CIHR, NSERC, SSHRC)* partnered grant: \$694,644, Apr 2019 3 yrs).

Pilot program aims to support patients in optimal pain management

After joint replacement surgery, most patients are prescribed pain medication to help manage potential post-operative pain when they return home.

Every patient manages pain differently and may not need all of the prescribed medication. Because unused pain medications are a risk to patients and their families, care teams at the Holland Centre in collaboration with surgery, pharmacy, nursing, physiotherapy, occupational therapy, and social work, started a pilot project at the Holland Centre, called RECOVERED (Reclaiming ExCess Opioid for VERifiEd Disposal).

This initiative is for patients who have had a joint replacement at the Holland Centre. It offers patients the option of a secure and convenient way to dispose of the extra pain medication they do not need.

“We ask patients in advance of their six week follow up, to bring in all of their medications including pain medications. We then review with them where they’re at with regards to how and if they need to be managing pain and their medication needs overall,” says **Dr. Bheeshma Ravi**, project co-lead. Dr. Ravi is an orthopaedic surgeon in the Holland Bone and Joint Program, and an associate scientist in the Holland Bone and Joint Research Program.

“If patients no longer need these medications, they can choose to return the unused portion as part of this bring-back initiative. Medications are securely locked away. They are only removed by authorized personnel for verified disposal,” says **Andrew Kennedy**, project co-lead, and manager of the Pre-Op Clinic and Patient Orientation Program at the Holland Centre, which is also part of Holland Bone and Joint Program.

This pilot is being conducted at the Holland Centre. The teams hope patients continue to feel supported in their care experiences in how they are managing pain and helping ensure unused pain medications are disposed of safely.

Everyone manages pain differently after joint replacement



Talk with your surgeon. Pain management is important to your well-being but you may not need all the pain medication prescribed.

RECOVERED (Reclaiming ExCess Opioids for VERifiEd Disposal) is a pilot program that offers our patients at the Holland Centre a secure, convenient and optional way to dispose of the extra pain medication they don't need.

were torn and detached, as was half of her bicep muscle.

“The damage was extensive, and would be classified as a “massive rotator cuff tear” - essentially, she had the worst of the worst as far as rotator cuff tears go. Sometimes we have to perform shoulder replacements in these patients, however we have been having success with modern repair techniques, and she is a very active woman,” says Dr. Henry, assistant professor, Department of Surgery, University of Toronto. “She was a good patient and did her physio which makes a big difference in the outcome - and thankfully hers has been great.”

“It was well worth it!” says Almeda.

“If it weren’t for Dr. Henry, I would not be able to do what I always planned to do. I have good rotation and good movement. I still have vulnerable spots in my shoulder and need to be careful, and patient. Each week I am aware of doing something with ease that I couldn’t do the week or month before. Most amazingly at this point, I can play the piano for up to an hour at a time, fast and forte if the music requires it.”

“After almost sixty years, my shoulder actually works! I am so grateful!”

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Sometimes we have to perform shoulder replacements in these patients, however we have been having success with modern repair techniques... [Almeda] was a good patient and did her physio which makes a big difference in the outcome - and thankfully hers has been great. – Dr. Henry

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For health blogs, visit health.sunnybrook.ca

The Holland Bone and Joint Program is one of North America’s finest in musculoskeletal care, education and research. The Program provides integrated services in orthopaedic surgery, orthopaedic trauma, rheumatology and rehabilitation. Located at Sunnybrook’s sites of the Holland Orthopaedic and Arthritic Centre and Bayview, the Program is a key referral centre for complex trauma orthopaedic surgery, spine surgery, hip and knee joint replacement, soft tissue injury reconstruction, and shoulder and upper extremity surgery. The Holland Bone and Joint Program also encompasses the Working Condition program and Sunnybrook Centre for Independent Living (SCIL).