



Long and Short Term Survival of Total Hip Replacement Cases in United Kingdom

M A Hussein Wahedally
BSc Actuarial Science (Partly Qualified)
PhD Student in Statistics
University of East Anglia, UK

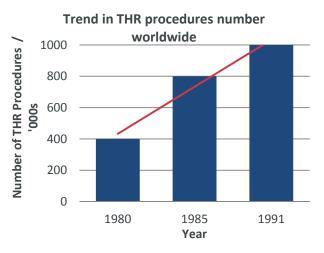
Elena Kulinskaya
Professor in Statistics
School of Computing Sciences
University of East Anglia, UK

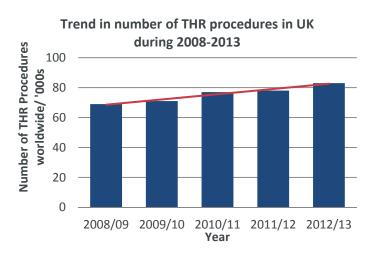
Alexander Mcgregor
Professor in Epidemiology
School of Medicine
University of East Anglia, UK

Contents

- The actuarial implications of an increasing number of THR procedures
- The THIN Study A frailty survival analysis study of 10,155 THR cases in England, Wales and Northern Ireland
- THR cases die earlier than matched controls in the short and long term
- Actuarial implications of higher mortality risk after THR
- Further research

Increasing trends in THR procedures





An increasing number of THR procedures carried out across many countries (Levy, et al., 1985 and Soderman, 2000) while in UK alone, there is a yearly increase of 8% (NJR Report 2013).

Actuarial implications

- Possible increasing number of THR procedures among population of customers buying life assurance, pension and annuity products.
- Does this give rise to mortality/longevity risk and eventually basis risk?
- Impacts of benefits allocation to customers with THR procedures, for example enhanced benefits.

The THIN Study

Purpose

- A retrospective cohort matched study design.
- To study the direct effects of THR procedures on short and long term survival for individuals with different characteristics.

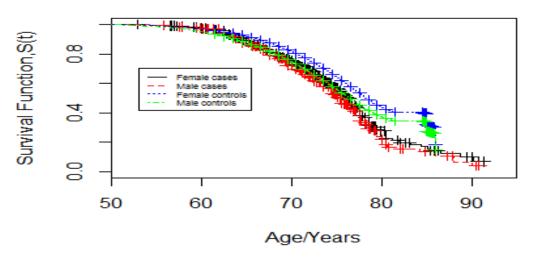
Patients Selection

- Identified 10,155 primary THR cases and 49,559 controls from THIN database.
- Assumed same exposure to death for patients in same GP practice matched by age and sex.
- Demographical, lifestyle, medical and geographical variables were extracted.

Statistical Analysis

Preliminary analysis

Kaplan Meier Survival Function



- Include deaths in short and long term.
- Cases survive less than controls.
- Female cases survive less than female controls.
- Male cases die earlier than male controls.
- Female cases survive longer than male cases.

The Survival Model – Frailty Cox Model

$$\lambda_{ki}(t) = \boldsymbol{\varepsilon_k} \lambda_0(t) \exp(\beta^T Z_{ki})$$

- Post-THR hazard of death for *i*th individual from the *K*th GP Practice.
- ε_k measures the frailty associated with each GP Practice.

Statistical Analysis

THIN Project – Summary of Results

Short-term v/s Long-term results

- Deaths within 2 years 968 THR cases died within 2 years of surgery.
- Higher risk of deaths associated at the early post-surgery stages (≤2 years).

Estimation of hazard of death		
Cases vs Controls	THR cases surviving beyond 2 years post-surgery	THR cases dying within 2 years of surgery
Controls	1.00	1.00
Cases	1.08	1.49

Variability of hazard of death post-THR surgery

- Males THR cases have a higher post-THR risk of death than female.
- Being overweight increases hazard of death post-THR in the short term only.
- Post-THR risk of death increases with the deprivation score of the individuals residential area (1.00-1.19) in the short and long term.
- Higher hazard of deaths post-THR surgery (1.08-1.20) in residential areas with high proportion of white individuals(≥40%).

Statistical Analysis

THIN Project – Summary of Results

Variability of hazard of death post-THR surgery

- Being a THR patient and having one of these comorbidities pre-surgery time increases the hazard of death after THR procedures: high cholesterol (with or without medication), hypertension, osteopenia, osteoporosis and myocardial infarction.
- Having Type II diabetes pre-surgery decreases post-THR risk of death by 2% and 3% in the short and long term.

Conclusion

 Gender, Year of birth, BMI pre-surgery time, Townsend score and proportion of white individuals living in same area of individuals, BP, Cholesterol level and event of MI prior to THR have a <u>direct impact</u> on risk of death for <u>THR cases</u> after surgery in the short and long term.

THIN Project – Implications of Results

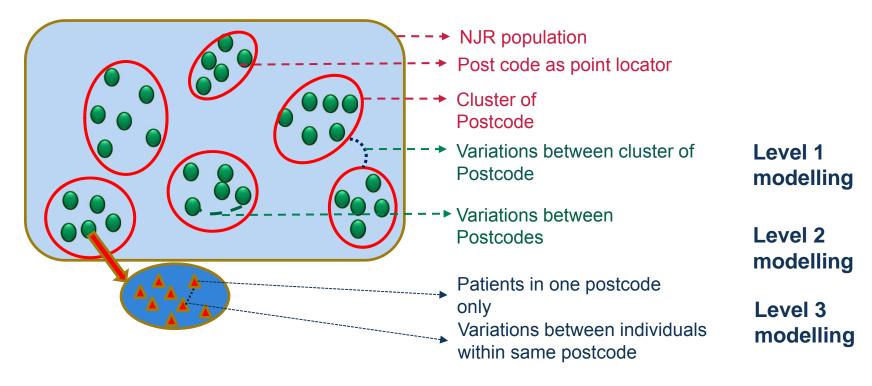
- The THIN study demonstrated that THR procedures alone increase the risk of death by 49% and 8% in the short and long term respectively – Higher mortality associated with THR customers.
- This is a source of basis risk for actuarial assumptions and a concern for the life assurance, pension and annuities selling industry

- Higher mortality risk for life assurance.
- Premiums, reserve and benefits calculations need to take account of the 'THR procedures' factor.
- Reduced longevity risk for pension and annuity businesses
- THR customers can be granted additional bonuses besides their basic pension benefits.
- Annuitants can be allowed to receive enhanced annuities.

Further Research

NJR Project – An Overview

- Permit full spatial survival analysis.
- 3 level Survival model An extension of the shared frailty model used for THIN analysis.



Questions

Comments