ASA position statement on surgery during the COVID-19 pandemic

Arthroplasty Society of Australia



27 March 2020

The Arthroplasty Society of Australia strongly supports the position taken by the Australian Orthopaedic Association and the Royal Australasian College of Surgeons with regard to the performance of all non-essential surgery.

Delaying lower-limb arthroplasty surgery will result in a prolongation of disability; however, this must be balanced against the risk of surgery at this particular time. Exposing patients, medical staff, and other ancilliary hospital staff to the risk of serious illness and the possibility of quarantine at a crucial time is a real concern. Medical manpower must be preserved to prepare for the increasing workload of the pandemic. PPE, drugs and devices used to manage COVID-19 must be preserved.

Non-operative treatment should be considered where possible and wherever possible managed in the ambulatory setting or the emergency department, without admission to hospital.

Arthroplasty surgery should only be considered after appropriate peer review for these urgent conditions:

- 1. Acute deep infections
- 2. Periprosthetic fracture requiring surgery
- 3. Acute prosthetic dislocation, which should be managed in a closed fashion wherever possible
- 4. Fractured neck of femur
- 5. Chronic periprosthetic infection creating a threat to life or limb
- 6. Implant failure by breakage
- 7. Collapsed femoral head (AVN) resulting in severe intractable pain

Elective primary and revision hip and knee arthroplasty surgery should otherwise be cancelled or delayed during the COVID-19 crisis.

In all cases where surgery is to be performed according to the above guidelines, the specific risks of the case to staff and patients as well as the post-operative care in the specific hospital environment must be considered. Documented peer review of each proposed case is to be performed prior to surgery.

As this is an evolving situation this position statement will be reviewed and updated as required.

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