



## Public summary

September 2015

Using data from the Hospital Morbidity Database (HMDB), National Ambulatory Care Reporting System (NACRS) and Canadian Joint Replacement Registry (CJRR), this annual report provides information on hip and knee replacements performed in Canada in 2013–2014, as well as trends over the past 5 years. CJRR coverage has significantly increased, from 42% of all hip and knee replacements in Canada in 2011–2012 to 67% in 2013–2014.

### *Additional resources*

The following companion products are available on **CIHI's website**:

- Annual report
- Data tables

### *Talk to us*

For data-specific information:  
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## Joint replacements in Canada: More patients, more surgeries, less time in hospital

### *Hip and Knee Replacements in Canada: Canadian Joint Replacement Registry 2015 Annual Report*

The Canadian population is aging, and hospitals are performing more joint replacement surgeries every year. As the number of these procedures continues to increase, so do the related health costs.

A patient sometimes needs to return to hospital to have the implant replaced, known as a revision. Reducing the number of revision procedures as well as their length of stay (LOS) not only helps significantly decrease costs within the health system but also can save patients from having to repeat the surgical and recovery processes, and allow them to return home more quickly.

### **Key findings**

- From 2009–2010 to 2013–2014, the LOS for hip replacements decreased from 5 days to 4.
- Over the same 5 years, the LOS for knee replacements decreased from 4 days to 3.
- The number of hospitalizations for hip replacements increased from 41,573 in 2009–2010 to 49,503 in 2013–2014, representing a 5-year increase of 19.1%.
- The number of knee replacements performed increased from 48,946 in 2009–2010 to 60,136 in 2013–2014, representing a 5-year increase of 22.9%.
- The 3-year risk of knee revisions (2.29%) was lower than that of hip revisions (2.38%).
- In 2013–2014, 8.9% of hip and 6.7% of knee replacements were revision procedures. This was a slight decrease over the previous 5 years for hip replacements (from 10.8% in 2009–2010). The figures for knee replacements were stable.