

O126 Patient acceptable symptom state (PASS) for PROMIS domains following traumatic pelvic and acetabular fractures

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Objective: Minimally clinically important differences are used to assess meaningful change on a patient-reported outcome measure, the patient acceptable symptom state (PASS) is often considered a more clinically relevant measure of response. The objective was to determine PASS scores for PROMIS Physical Function (PF) and Pain Interference (PI) in patients following pelvis and/or acetabular traumatic fractures (P&AFx).

Methods: This was a 3-year prospective observational study of adult patients with isolated P&AFx undergoing operative and non-operative treatment. PASS thresholds were calculated separately for 3- and 6- months post-injury and defined in two ways: 1) binary patient response for satisfaction with current state, and 2) patients reported acceptability of change since injury. PASS was calculated using 5 different tests: greatest sum of sensitivity and specificity (SSum), 80% specificity, 45-degree, 75th percentile, and 3 tertiles based on 75th percentile.

Results: A total of 114 patients are included with an average age of 54 years (SD=15) and 58% identified as male. The AUC for PF at 3- and 6-months was 0.80 for both and for PI it was 0.7 and 0.8, respectively. For PF at 3-months using the patient satisfaction criteria, PASS threshold with 95% CI ranged from a low 42 (40 -44) [SS sum] to high of 51 (44 – 58) [75th perc – tertile 3]. At 6-months using the same criteria the PASS was 45 (43 – 46) [45-degree] to 60 (53 – 63) [75th perc – tertile 3]. P I PASS ranged from 43 (41 – 49) at 6 months [45-degree] to 60 (52 – 64) [75th perc – tertile 3] using the change criteria.

Conclusions: The PASS thresholds for PROMIS PF for patients with P&AFx was found to range from 1SD below the population norm to within PROMIS population norms at 3 months (t-score = 50 (SD=10). This shifted at 6 months from within norms to 1 SD above the population norm. PROMIS PI findings were similar at 3 months, but at 6 months PI could be almost 1SD above the norm and considered acceptable. Defining PASS scores for PROMIS measures allows surgeons to better interpret and use PROMs to incorporate the patient voice in clinical decision-making.