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Supplement of

Total hip arthroplasty performed in summer is not associated with increased risk of revision due to prosthetic joint infection: a cohort study on 58 449 patients with osteoarthritis from the Danish Hip Arthroplasty Register

Rajzan Joanroy et al.

Correspondence to: Rajzan Joanroy (rajzan.joanroy2@rsyd.dk)

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Supplementary tables

Table S1. Relative risk (RR) for revision due to prosthetic joint infection (PJI)¹ at 1 year by season of primary total hip arthroplasty (THA) with 95 % confidence interval (CI) stratified by patient characteristics

Covariates	Revision s	Crude RR (95% CI)		P valu e	Adjusted ² RR (95% CI)		P value (Adjuste d RR)
		Summer ³ (n= 17,623)	Rest of the year (n= 40,826)		Summer 3 (n= 17,623)	Rest of the year (n= 40,826	
Sex							
Female	262	1.1 (0.8- 1.4)	1.0 (ref)	0.64 7	1.1 (0.8- 1.4)	1.0 (ref)	0.635
Male	274	1.1 (0.9- 1.5)	1.0 (ref)	0.29	1.1 (0.9- 1.5)	1.0 (ref)	0.324
Age (years)							
≥65	396	1.0 (0.8- 1.3)	1.0 (ref)	0.73 3	1.0 (0.8- 1.3)	1.0 (ref)	0.702
<65	140	1.3 (0.9- 1.8)	1.0 (ref)	0.18 7	1.3 (0.9- 1.8)	1.0 (ref)	0.168
Comorbidity							
No comorbidity	376	1.1 (0.9- 1.4)	1.0 (ref)	0.31 9	1.1 (0.9- 1.4)	1.0 (ref)	0.305
Any comorbidity	160	1.0 (0.7- 1.5)	1.0 (ref)	0.79 8	1.0 (0.7- 1.5)	1.0 (ref)	0.777

¹≥2 culture-positive biopsies for the same bacteria or reported PJI in Danish hip arthroplasty register

²Adjusted for age groups, sex, Charlson Comorbidity Index, cohabitation status, prosthesis fixation type and duration of antibiotic treatment in relation to primary THA.

³Summer, June-September.