Background

- 1/3 of the population aged 45 and older may suffer from some form of foot and ankle pain
- The total economic burden of foot and ankle surgery among Medicare recipients between increased 38.2% from 2000 to 2011, accounting for $38 billion in healthcare costs
- Posterior tibial tendon dysfunction (PTTD) is thought to be the leading cause of adult acquired flatfoot deformity (AAF)
- There has been little focus on the prevalence, incidence, and economic burden of AAF in the US population

Objectives

- To examine surgical incidence, demographics and economic burden of AAF using a national database
- To compare these results to our previous study using a South Carolina State database

- 29,159 patients underwent AAF corrective surgery on an inpatient basis between 2005 and 2013
- The highest number of surgeries was performed in 2009 (3,635)
Disclosure

· I and/or my co-author have something to disclose: consultant – Medline, Reviewer – FIA, CORR, FOA, Program and CFE Committee – AOFAS. Please refer to the disclosure program on AAOS website for more detail.
Results

- Surgical incidence rates peaked at 1.18% in 2009
- Rates trended downward to a low in 2013 at 0.89%
- Inpatient AAFF surgical incidence rates were much lower than surgical incidence rates seen in SC during a similar ten year time period, which rose from 2.85 to 6.37% and included outpatient procedures

- Surgical costs associated with AAFF totaled over $4 billion between 2005 and 2013
- Costs associated with AAFF surgical treatment rose steadily from 2005–2013 independent of surgical count and surgical incidence rates
- Despite a lower surgical incidence than seen in our state database study, the surgical costs rose at an alarming rate
Economic Burden of the Surgical Treatment of Adult Acquired Flatfoot in the US Population

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Summary and Conclusions

- Our data shows an alarming increase in the burden of disease for AAFF on society over the past 10 years.
- Patients undergoing surgery for AAFF contributed more than 4 billion dollars to national healthcare costs between 1994-2014.
- Our study confirmed prior small scale studies, including our study using the SC database, of the population most at risk.
- Similar to the results from our SC study, AAFF surgery contributes to a small portion of surgeries performed annually, yet the associated costs contribute to a significant economic burden on society.
- Further analysis will help to determine whether surgical incidence has truly increased in recent years.

# Patients per Age and Gender

- Patients were more likely to be female (69.99%).

Race

- Patients were most likely to be female and in their fifth decade of life.

- African-American: 26%
- American Indian: 0%
- Asian: 71%
- Hispanic: 3%
- White: 2%