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For more information, contact:

Deanna Killackey	847-384-4035	630-815-5195	killackey@aaos.org
Lauren P. Riley	847-384-4031	708-227-1773	pearson@aaos.org

Studies Explore: Semaglutide Use and Its Impact on Total Hip Arthroplasty Postoperative Outcomes

Patients who take semaglutide at the time of THA experience similar postoperative outcomes to those who do not

SAN FRANCISCO (Feb. 12, 2024)—Ozempic and Wegovy, which both contain the active ingredient semaglutide, have received recent attention in the media and on social platforms for its effectiveness in supporting weight loss. Ozempic, which is approved for people with Type 2 diabetes, has now become a widely accepted choice for weight loss, and Wegovy was approved in 2021 for long-term weight management.

According to the [American Academy of Orthopaedic Surgeons](https://www.aaos.org) (AAOS), [obesity](#) and [diabetes](#) increases a person's risk of having a medical or surgical complication after joint replacement, such as wound healing problems and infection. As the use of semaglutide increases among patients for diabetes and/or weight management, it's important to understand how it can impact postoperative outcomes of joint replacement surgery.

Two studies presented at the AAOS 2024 Annual Meeting looked at the use of semaglutide and its impact on outcomes of total hip arthroplasty (THA), finding that patients who take semaglutide at the time of THA experience similar postoperative outcomes to those who do not take the drug.

STUDY OVERVIEWS AND OUTCOMES

The effect of semaglutide (Wegovy) treatment on postoperative outcomes of THA in patients with obesity: A matched study

Utilizing a large comprehensive national database (TriNetX), researchers (co-led by David Momtaz, MPH, a fourth-year medical student at Long School of Medicine – UT Health San Antonio, and Daniel Pereira, MD, orthopaedic surgery resident at Washington University Barnes-Jewish Hospital) compared postoperative complications among obese patients who used semaglutide and underwent THA to patients without prior use of the medication who underwent the same procedure. A total of 616 patients in each cohort were analyzed. The average patient age was 62.7 years, 55% of patients were female and the average BMI was 35.5, which is considered to be obese.

The researchers found that postoperative complications after THA are similar between obese patients using semaglutide compared to those who did not. Both cohorts experienced a similar risk of hip arthroplasty revision, prosthesis infection, opioid-related disorders, surgical site infections, mortality, respiratory failure, pulmonary embolism, deep vein thrombosis, postoperative dehydration, cardiovascular comorbidities, shock, and prosthesis dislocations.

Semaglutide use prior to THA results in fewer postoperative prosthetic joint infections and readmissions

Researchers (led by Matthew Magruder, a third-year resident at Maimonides Health in Brooklyn, NY) sought to evaluate whether diabetic patients who are taking semaglutide at the time of THA demonstrate: 1) fewer medical complications; 2) fewer implant related complications; 3) fewer readmissions; and 4) less costs. They conducted a retrospective query from Jan. 1, 2010, to Oct. 31, 2021, using the administrative claim database (PearlDiver). The findings note that diabetic patients who were taking semaglutide at time of THA:

- Did not demonstrate statistically significant higher rates of complications compared with controls.
- Had lower rates of readmission within 90 days of surgery and lower rates of prosthetic joint infection.

- There was no difference between groups for any other implant related complication and no difference between cohorts for lengths of stay, same-day surgical costs or 90-day episode of care costs.

To schedule an interview with an orthopaedic surgeon to learn more about the correlation between musculoskeletal health and obesity, or to hear more about how lifestyle changes can help prevent muscle mass and bone density loss, email media@aaos.org.

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2024 AAOS Annual Meeting Disclosure Statement

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