

## Validation of the English language Forgotten Joint Score-12 as an outcome measure for total hip and knee arthroplasty in a British population

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### AIMS

To validate the English language Forgotten Joint Score-12 (FJS-12) as a tool to evaluate the outcome of hip and knee arthroplasty in a United Kingdom population.

### PATIENTS AND METHODS

All patients undergoing surgery between January and August 2014 were eligible for inclusion. Prospective data were collected from 205 patients undergoing total hip arthroplasty (THA) and 231 patients undergoing total knee arthroplasty (TKA). Outcomes were assessed with the FJS-12 and the Oxford Hip and Knee Scores (OHS, OKS) pre-operatively, then at six and 12 months post-operatively. Internal consistency, convergent validity, effect size, relative validity and ceiling effects were determined.

### RESULTS

Data for the TKA and THA patients showed high internal consistency for the FJS-12 (Cronbach  $\alpha$  = 0.97 in TKAs, 0.98 in THAs). Convergent validity with the Oxford Scores was high ( $r$  = 0.85 in TKAs,  $r$  = 0.79 for THAs). From six to 12 months, the change was higher for the FJS-12 than for the OHS in THA patients (effect size  $d$  = 0.21 versus -0.03). Ceiling effects at one-year follow-up were low for the FJS-12 with just 3.9% (TKA) and 8.8% (THA) of patients achieving the best possible score.

### CONCLUSION

The FJS-12 has strong measurement properties in terms of validity, internal consistency and sensitivity to change in TKA and THA patients. Low ceiling effects and good relative validity allow the monitoring of longer term outcomes, particularly in well-performing groups after total joint arthroplasty. Cite this article: Bone Joint J 2017;99-B:218-24.

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