



British Scoliosis Society



B A S S

British Association of Spine Surgeons

Statement from the British Scoliosis Society (BSS) and the British Association of Spine Surgeons (BASS) regarding wait times for adult and paediatric elective spine patients

A recent publication of a paper in Bone and Joint Journal highlighted the “worse than death” quality of life scores for a number of patients in pain from arthritis of the hip and knee with lengthened wait times due to the COVID-19 pandemic.¹

As spine surgeons managing patients in severe pain due to arthritic conditions as well as severe pain and despair from nerve root compression, we very much echo the concerns from our arthroplasty colleagues about our patient groups.

There are many patients now waiting many months for pain relieving interventions that have not been able to access elective lists due to the capacity issues related to the pandemic. These interventions usually come at the end of a conservative trial that has already failed, meaning that there is no other alternative for these patients whilst waiting. In addition, we have all seen patients progress to neurological compromise during the pandemic, requiring unplanned urgent or emergent surgery as a consequence. Unfortunately, on some occasions these can be irreversible changes. Children with spine deformity have also progressed in terms of their disease whilst waiting.

As organisations with clinician members concerned about the welfare of our patients, we urge that NHS bodies and Trusts work with us to find sustainable solutions to restart elective work in a safe way that allows equity of access to “COVID green” pathways, critical care facilities and MRSA screened facilities for spine surgery patients. We recognise that care needs to be focussed on clinical priorities, but welcome reassurance that the FSSA prioritisation categories are honoured regardless of underlying surgical condition. We also urge that resources are used to improve the well-being of all patients with awful pain that are awaiting surgery as soon as possible.

References:

¹ <https://online.boneandjoint.org.uk/doi/full/10.1302/0301-620X.103B.BJJ-2021-0104.R1>