



Ministry
of Defence

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Ref: FOI2021/09961

30 September 2021

Thank you for your email dated 6 September 2021 requesting the following information:

“Can you please confirm for me how many service members in all branches of her Majesty’s Armed Forces have been diagnosed with Labral tears of the hip whilst in service in the last 10 years?

Of those who have been diagnosed with labral tears, can you please confirm how many continued to serve in the armed forces after receiving such a diagnosis and how many were subsequently medically discharged?

If you have the information can you also please confirm, of the number that remained in service, how many had surgery to repair these labral tears and how many received non surgical treatment.”

I am treating your correspondence as a request for information under the Freedom of Information Act 2000 (FOIA).

A search for the information has now been completed within the Ministry of Defence, and I can confirm that the information in scope of your request is held.

Between 1 April 2011 and 31 March 2021, a minimum of **854** UK armed forces regular personnel had a labral tear of the hip recorded in their electronic medical record.

Between 1 April 2011 and 31 March 2021 (latest published data), **252** UK armed forces regular personnel were medically discharged after having a record of a labral tear of the hip entered into their electronic patient record since 1 April 2011. Please note that the diagnosis of a labral tear of the hip may not have been listed as a principal or contributory cause of the subsequent medical discharge and may have been for an unrelated condition.

The remaining **602** personnel were not medically discharged as at 31 March 2021.

Of those remaining in service, a minimum of **17** personnel had a surgical repair to a labral tear recorded in their electronic medical record.

Under Section 16 of the act (Advice and Assistance), it may be helpful to note the following:

The figures provided for the number of personnel diagnosed with a labral tear of the hip, and for those who have received surgical treatment, are a minimum for the following reasons:

- Clinicians may have recorded symptoms for hip pain rather than the specific codes listed below.

- Surgical procedures and some diagnoses take place in secondary care (NHS or private hospitals). A hospital may then advise a military GP if a patient has a diagnosis or a surgical procedure in the form of a letter. A military GP can record this information in a number of ways: a paper letter may be filed in a paper medical record, a letter may be scanned into the electronic patient record (in a pdf format) or the GP may enter Read codes into the electronic patient record which can be searched for electronically. Defence Statistics Health are only able to identify personnel who have undergone surgery or a diagnosis when a Read code has been entered into the electronic patient record.

Defence Medical Information Capability Programme (DMICP) was rolled out in 2007 and has a centralised data warehouse of coded information. It is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers.

Medical data is stored in the DMICP data warehouse using Read codes. The Read codes that were used to search the DMICP data warehouse for military personnel with labral tear of the hip were:

N0876 (Acetabular labrum detachment)
N0877 (Acetabular labrum tear)

The Read codes that were used to identify surgical treatment of a labral tear of the hip were:

7NC57 ([SO]Acetabular labrum)
7K6WY (Endoscopic repair superior labrum anterior to posterior tear)

Please note that there are no Read codes that identify non-surgical treatments for this medical condition.

Please note that if information was entered as free text in the patient record then it is not available in the DMICP data warehouse and was not retrieved using the search for Read codes.

DMICP is a live data source and is subject to change. Data on personnel experiencing labral tears of the hip was extracted on 17 September 2021, and the data on surgery was extracted on 22 September 2021.

Personnel include all UK armed forces regular and Gurkha personnel. This does not include entitled or non-entitled civilians, reservists, foreign service or non-UK military. This response relates to all personnel who had a DMICP record and served between 1 April 2011 and 31 March 2021, and is not limited to the currently serving population.

Joint Personnel Administration (JPA) is the most accurate source for demographic information for UK armed forces personnel and was used to gather information on a person's service and gender. Medical discharges are the result of a number of specialists (medical, occupational, psychological, personnel, etc.) coming to the conclusion that an individual is suffering from a medical condition that pre-empts their continued service in the UK armed forces. Statistics based on these discharges do not represent measures of true morbidity or pathology. At best they indicate a minimum burden of ill-health in the armed forces. Furthermore, the number and diversity of processes involved with administering a medical discharge introduce a series of time lags, as well as impact on the quality of data recorded.

Information on medical discharges was sourced from electronic medical records (DMICP) and manually entered paper documents (FMed 23s). The primary purpose of these medical documents is to ensure the appropriate administration of each individual patient's discharge. Statistical analysis and reporting are secondary functions.

Defence Statistics release annual updates on medical discharges in the UK armed forces as an Official Statistic publication. The last statistical release was on 15 July 2021 which presented data up to 31 March 2021. The latest report can be found at:

<https://www.gov.uk/government/collections/medical-discharges-among-uk-service-personnel-statistics-index>

If you have any queries regarding the content of this letter, please contact this office in the first instance.

If you wish to complain about the handling of your request, or the content of this response, you can request an independent internal review by contacting the Information Rights Compliance team, Ground Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.gov.uk). Please note that any request for an internal review should be made within 40 working days of the date of this response.

If you remain dissatisfied following an internal review, you may raise your complaint directly to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not normally investigate your case until the MOD internal review process has been completed. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website at <https://ico.org.uk/>.

Yours sincerely

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