

**AIM:** Increase in one-year mortality following proximal femoral fractures in elderly patients was seen in many studies. Identification of factors increasing the risk of mortality is decisive for prognosis of these patients. Our aim was to identify significance of single factors on shortening of survival time and worsening of functional outcome. We have dominantly concentrated on influence of pressure sores and impairment of cognitive functions.

**METHODS:** In a prospective consecutive manner, we have observed 275 patients treated in our department in period from January 2003 to June 2005. We have observed altogether 25 prehospitallisation, hospitalisation and posthospitalisation factors. Using statistical tests (log-rank, Mann-Whitney, logistic regression), we have analysed relationship between length of survival and different observed factors on a 5 % level of significance.

**RESULTS:** In our study, we have identified factors significantly shortening survival time. These were: age, male sex, comorbidities, decreased mobility before injury, acute general complications, development of pressure sores after surgery, insufficiency of osteosynthesis requiring revision surgery, deep wound infection and low ADL and MMSE scores.

**CONCLUSION:** Our study has identified simple predictors of poor functional outcome and shortening of survival time. It has also shown possible improvements in primary, secondary and tertiary prevention. In primary prevention, more emphasis must be given on health education of target group of endangered individuals. More information will be given concerning danger of osteoporosis, principles of rational nutrition, prevention of falls and moderation of their consequences. In secondary and tertiary prevention, there is and will be further held the education of medical professionals. Early detection of endangered patients will allow us to eliminate risks sooner and thus reach better functional results and extend survival time.