That's not a crowded OR





A Robot, A Fluoroscopy Unit, and a Navigation Station Walk into an OR... Now that's a crowded OR

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CORIN- Product development team, Omnibotics 3.0



THA as the "Operation of the Century"

THE LANCET Volume 370, Issue 9597, 27 October-2 November 2007, Pages 1508-1519



Review

The operation of the century: total hip replacement



Can We Improve This Procedure?

Perioperative Pathways

Patient Selection/ Optimization

Surgical Approach

Instrumentation

Implants

DON'T BE AFRAID TO GIVE UP THE GOOD TO GO FOR THE GREAT. JOHN D. ROCKEFELLER

Technologic Adjuncts



Technologic Adjuncts

Fluoroscopy

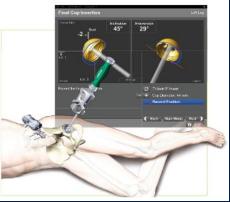
Navigation

Robot

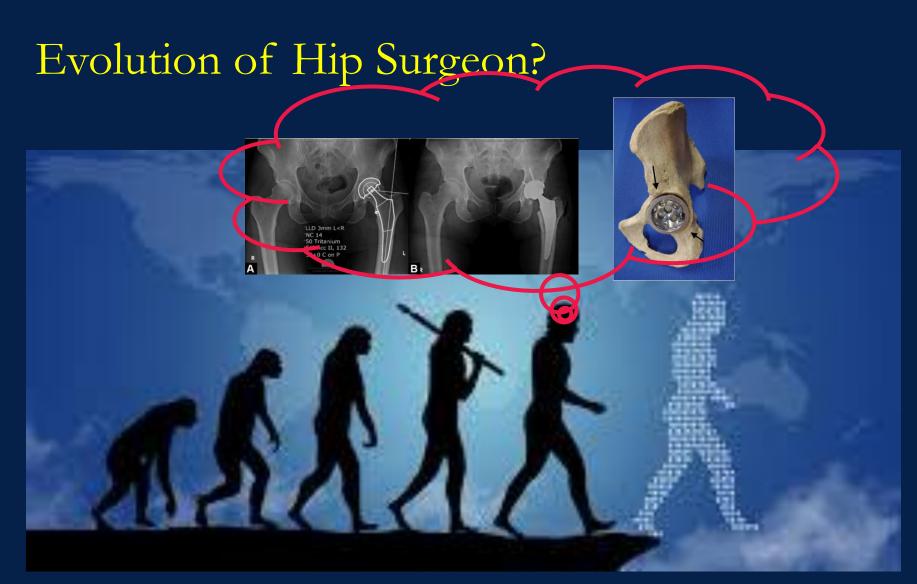












Homo Sapiens- Templates & Bony Landmarks



Evolution of Hip Surgeon?



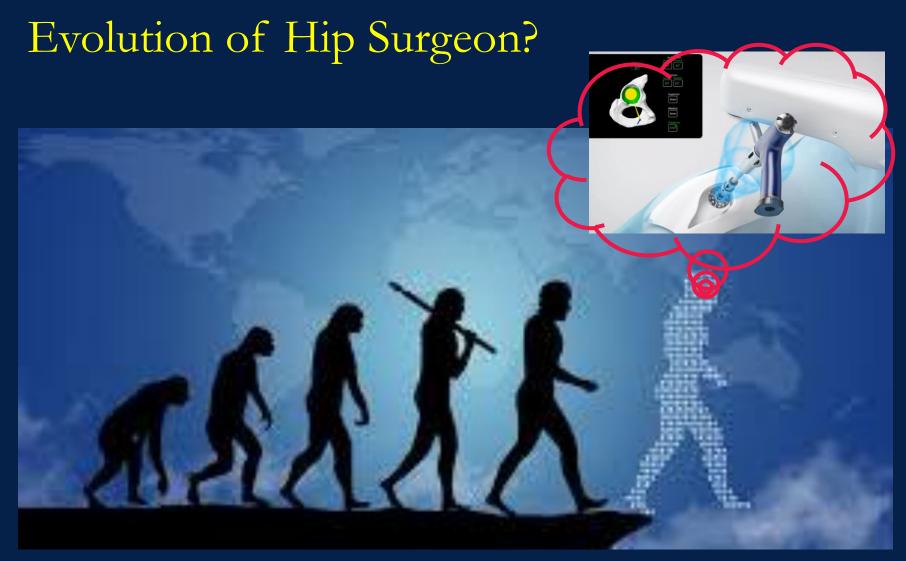


Evolution of Hip Surgeon?



Homo Navigatus- Intraoperative Navigation





Homo Robotis- Intraoperative Robotics



Why Technology?

Precision/ Reproducible

- Component sizing
- Component positioning
- Restoration of patient anatomy



Why Technology?

Precision/ Reproducible

- Component sizing
- Component positioning
- Restoration of patient anatomy

Reduce Complications/Reoperations

- Dislocation
- Leg length inequality/ Offset
- Aseptic loosening
- Periprosthetic fracture
- PE wear

Improve Clinical Outcomes



Literature

Comparative Studies

- Technology vs Conventional
- Technology vs Technology

Outcomes

- Radiographic
- Clinical

*** Disclaimer ****

- Multitude of companies
- Conflict of interest



Pyramid of Evidence





Contents lists available at ScienceDirect

The Journal of Arthroplasty

journal homepage: www.arthroplastyjournal.org

Systematic Review and Meta Analysis

The Impact of Author Financial Conflicts on Robotic-Assisted Joint Arthroplasty Research

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• Of 54 studies, 49 (91%) had an author financial COI

 Studies favoring robotics- higher number of conflicted authors and higher mean industry payment/ author



Fluoroscopy vs Manual

Improved acetabular component position

- DAA- 80% vs 63% in "safe zone" Jennings Orthopedics 2015
- DAA vs PL- 96% vs 78% Martin Arthroplasty Today 2020
- Achieving equality in LLD/ offset reliable from DAA approach
 - <5mm in 95% Of Cases Caus World J Orthop 2021, Martin Arthroplasty Today 2020
- Pelvic tilt can affect perceived component position
 - Match size/shape of obturator foramen w/ standing preop AP James J Arthroplasty 2018
- Learning curve for interpretation
 - Accuracy component positioning yearly (79%->91%->96%) Slotkin J Arthroplasty 2015



Navigation vs Manual

Quality of Studies- SR/MA (4), RCT (2), Registry/Database (3)

Radiographic

- Improved acetabular component position, esp. anteversion Shigemura Orthop Traumatol Surg Res 2021, Liu Int J Surg 2015, Tanino J Arthroplasty 2020
- More accurate LLD/ Offset Migliorini J Orthop Traumatol 2022, Jia Medicine 2019
- CT based more accurate than image free navigation, due to variability in pelvic tilt Hasegawa Comput Assist Surg 2021, Tetsunuga Hip Int 2021

Clinical

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- No diff in Harris Hip Score Migliorini J Orthop Traumatol 2022
- No diff in dislocation rate Migliorini J Orthop Traumatol 2022
- Surgical time longer (-10min) Tanino J Arthroplasty 2020



Navigation-Registry/ Database Studies

- Australian Orthopaedic Association NJR Agarwal JBJS 2021
 - N=6,912 CAS-THA, use in 2009 (1.9%) vs. 2019 (4.4%)
 - No diff in all cause revision for entire group
 - Lower rate of dislocation @10yrs- 0.4% vs 0.8%
 - Sub-analysis of 5 most common THA constructs lower all cause revision rate 2.4% vs 4.2%
- Medicare Database Montgomery J Arthroplasty 2019

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- 2005-2012, N=69K THAs, 5,412 CAS-THA, 60K M-THA
- CAS not assoc w/ lower rate of dislocation @30d, 90d, or 2yr
- CAS assoc w/ higher rate of ppx fx , and rev THA @30d
- Nationwide Readmission Database Gausden Int Orthop 2020
 - 2012-2014; N=309K THA, 8,431 CAS-THA, multivariate analysis
 - 12% reduced odds of 90d complications; No diff in revision surgery



Robotics vs Manual

- Quality of Studies- SR/MA (5), RCT (0), Registry/Database (3)
- Radiographic
 - Consistent improvement in acetabular component positioning and restoration of leg length Clement Bone Joint Res 2021, Domb JAAOS 2020
- Clinical
 - Mixed data on improvements in PROMS
 - HHS and FJS-12 higher, no diff in VAS @ 2yr f/u Perets Orthopedics 2021
 - Higher mean HHS (92 vs 86), pre-postop Delta HHS (43 vs 37), no diff in SF-12 or WOMAC Bukowski Surg Technol Int 2016
 - Forgotten Joint Score higher, though EQ-5D not Clement Bone Joint Res 2021
 - Operative time longer in RA-THA (9min) Bukowski Surg Technol Int 2016



Robotics- Systematic Review/ Meta Analysis

- Positive (+) Ng Bone Joint J 2021, Kumar Postgrad Med J 2021
 - Improved acetabular component position
 - Improved HHS in short and midterm f/u
 - Increased operative time
 - No diff in complication rate, and survival rates
- Neutral (+/-) Sweet JBJS Rev 2021, Karunaratne Int Orthop 2019, Samuel J Robot Surg 2022
 - Majority of studies found no diff in PROMs, satisfaction
 - 2 low quality studies found sig better PROMs in RA-THA
 - Most studies presented some risk of bias, and strength of evidence rated as low to very low quality
 - No diff in complication/ revision rates
 - 1 study found higher dislocations and revisions in RA-THA



Robotics- Database Studies

Nationwide Inpatient Sample- RA-THA, CA-THA and M-THA Emara Bone Joint J 2021

- No diff in mean LOS
- Implant related mechanical complications lower in RA and CA-THA vs M-THA (2-3x), primarily dislocation
- Pearldiver Database Remily Arthroplasty Today 2021
 - RA-THA shorter LOS (3.4 vs 3.7d)
 - Readmission rates higher (7.8% vs 6.6%)
 - No diff in surgical outcomes @ all time points



Technology vs Technology

Robot vs Fluoro

- No diff in XR parameters, except inclination (3.8' vs 4.6') Stewart J Arthroplasty 2022
- Robot vs Navigation
 - Surgical time (135 vs 146min), # days to independent walking (7 vs 11), postop pain, and HHS (85 vs 81) favored RA-THA. No diff in XR parameters. Shibanuma BMC MSK Disord 2021
- Robot vs Navigation vs Manual
 - Stat sig diff in PROMS but none met MCID
 - LOS longest for M-THA vs Nav-THA vs RA-THA (2.2 vs 1.5 vs 1.9d)
 - OR time longest for RA vs Nav-THA vs M-THA (120 vs 90 vs 95 min) Singh J Arthroplasty 2021



Special Considerations

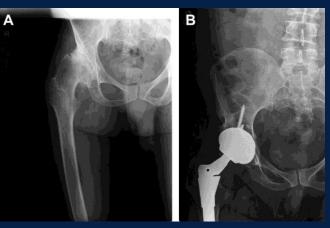
DDH

- RA-THA- improved HHS, ROM, and LLD from 17 to 4mm Vigdorchik Arthroplasty Today 2020
- Improved accuracy of cup size/ position (96% vs 37%) Ueoka J Arthroplasty 2019, Chai Int Orthop 2022
- Hip fusion takedown Adil Arthroplasty Today 2021
 - Accuracy of cup position vs M-THA (87% vs 55%) Zhang J Arthroplasty 2022
- Obese Patients Zhang J Orthop Surg Res 2022
 - RA-THA improved restoration of hip COR and LLD
- Revision THA

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 Navigation improved positioning within combined anteversion targets (78% vs 48%)









"Functional Safe Zone"

- Accuracy vs Precision
- Increased awareness of hip-spine relationship
 - 90% late dislocations- spinopelvic imbalance
- Combined sagittal index (CSI) Tezuka J Arthroplasty 2019
 - Sagittal acetab (PI) + femur position (PFA) on sit/stand lateral XR







Financial Implications

Direct Costs

- Capital expenditures
- Pre-op CT scan
- Disposables
- Maintenance



Indirect Costs

- Case length/ turnover time
- Case cancellations due to pre-op imaging/ intra-op robotic issues



Financial Implications

Robot-

- Disposables- \$688-750/case
- Maintenance- \$400-600/case

- Accelerometer estate



U,U

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Vear

Economics of Robotics

- Nationwide Inpatient Sample- RA-THA, CA-THA and M-THA Emara Bone Joint J 2021
 - RA and CA-THA higher in hospital costs (\$2,000)
- Medicare 100% data- 90d Episode of Care costs lower in RA-THA Pierce J Comp Eff Res 2021
 - \$785 lower, due to dec utilization of post acute rehab services
- Markov Analysis Maldonado JAAOS 2021
 - RA-THA cost savings of \$945 (Medicare) and \$1,810 (Private)
 - RA-THA cost effective in 99.4% of cases
- Pearldiver Database Remily Arthroplasty Today 2021
 - RA-THA shorter LOS (3.4 vs 3.7d)
 - Mean cost of RA-THA \$1684 and \$1759 less at 90d and 1yr



Conclusions

 Technologic adjuncts in THA allow more reproducible component position and accurate restoration of patient anatomy

 Their impact on reducing complications and improving clinical outcomes remain to be seen

 Given the costs associated, further high quality, unbiased research is imperative prior to widespread adoption



