JOURNAL CLUB CASES PRIMARY THA

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DISCLOSURES

- Smith and Nephew---Fellowship funding
- Stryker----Fellowship funding
- Omega ---Fellowship funding

68 Y/O HEALTHY FEMALE













EVIDENCE FOR APPROACH

FULL LENGTH ARTICLE · Volume 30, Issue 3, P419-434, March 2015



Anterior vs. Posterior Approach for Total Hip Arthroplasty, a Systematic Review and Meta-analysis

Brendan T. Higgins, MD, MS $\stackrel{\triangle}{\cap}$ • Daniel R. Barlow, MS b,c • Nathan E. Heagerty, MPH b • Tim J. Lin, MD, MS a,b

- 17 studies
- 2302 patients
- 4 studies favored Direct anterior at short term follow up
- Overall no difference in outcomes



EVIDENCE FOR APPROACH

Does Surgical Approach Influence the Natural History of the Unstable Total Hip Arthroplasty?

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Charles-Antoine Dion, MD, MSc, FRCSC ^{a,b} · Tom Schmidt-Braekling, MD ^{a,b} · Amedeo Falsetto, MD ^{a,b} · Cheryl Kreviazuk, BA ^a · Paul E. Beaulé, MD, FRCSC ^a · George Grammatopoulos, MBBS (Hons), DPhil (Oxon), MRCS (Eng), FRCS (Tr & Orth) \overset{\circ}{\sim} ^a
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- Retrospective single center study out of Ottawa 2002-2020
- 1667 posterior; 2779 lateral; 2383 direct anterior
- 75 patients suffered dislocation
- 58 (77%) dislocated within 6 months following primary THA
- mean number of dislocations per patient was significantly lower in the anterior (1.5 \pm 0.7) compared to the lateral (2.4 \pm 1.2) and posterior (2.1 \pm 1.0) groups (\blacksquare = .02)
- Revision surgery was needed in 30% (6/20) of patients in the anterior, 69% (25/36) of the posterior, and 68% (13/19) of the lateral groups (\blacksquare = .01).



79 Y/O HEALTHY FEMALE









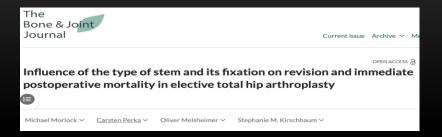




EVIDENCE FOR FEMORAL FIXATION



- 2604 Primary THA 2011-2021
- 469 > 75
- All couse revision lower >75 (1.9 vs 3.5%
- Femoral revision (1.5% vs 2.2%)
- Intra-operative fx (0.2 vs 0.5%)



- German Registry Study
- >300K patients 2012-2022
- Mid 1(61-70), Mid2 (71-80), Mid3 (>80)
- Cementless stems higher risk of revision in Mid3 group

63 Y/O FEMALE VERY HEALTHY, MOTIVATED











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EVIDENCE FOR BILATERAL

Systematic Review Open access | Published: 13 August 2022

Simultaneous versus staged bilateral total hip arthroplasty: a systematic review and meta-analysis

<u>Akam Ramezani, Amirhossein Ghaseminejad Raeini, Amirmohammad Sharafi, Mehrdad Sheikhvatan, Seyed Mohammad Javad Mortazavi & Seyyed Hossein Shafiei</u> □

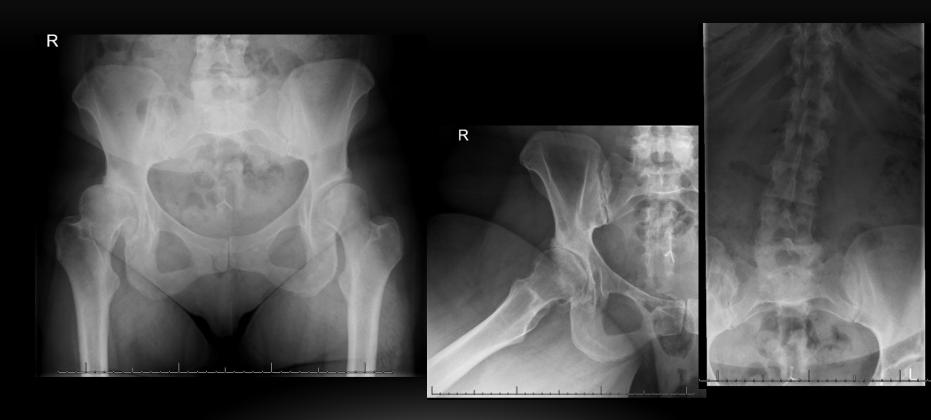
Journal of Orthopaedic Surgery and Research 17, Article number: 392 (2022) Cite this article

4557 Accesses | 18 Citations | Metrics

- 29,551 patients undergoing simBTHA and 74,600 patients undergoing stgBTHA
- simBTHA, a significant reduction in deep vein thrombosis (DVT) and systemic, local, and pulmonary complications
- increased pulmonary embolism (PE) and periprosthetic fracture risk in simBTHA
- simBTHA, total blood loss, length of hospital stay, and total cost were lower



40 YEAR OLD FEMALE WITH DYSPLASIA











EVIDENCE IN CONGENITAL DYSPLASIA

AAHKS SYMPOSIUM · Volume 32, Issue 9, Supplement, S38-S44, September 2017



Challenges in Total Hip Arthroplasty in the Setting of Developmental Dysplasia of the Hip

Eric M. Greber, MD · Christopher E. Pelt, MD △ · Jeremy M. Gililland, MD · Mike B. Anderson, MSc · Jill A. Erickson, BSc, PA-C · Christopher L. Peters, MD

- Be prepared for acetabular defects
- Put cup low and medial in true hip center
- Be prepared for femoral abnormalities
- Careful planning/preparation, have multiple options



78Y/O FEMALE













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74Y/O FEMALE MULTIPLE MEDICAL PROBLEMS (SEVERE COPD)(DAUGHTER CEO OF LOCAL HOSPITAL)







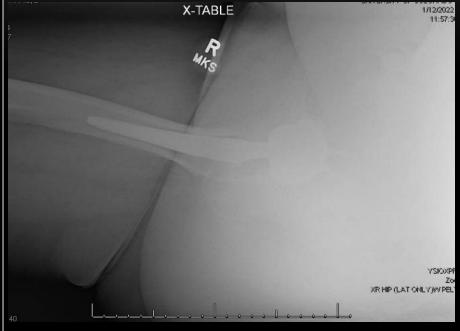




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67Y/O FEMALE





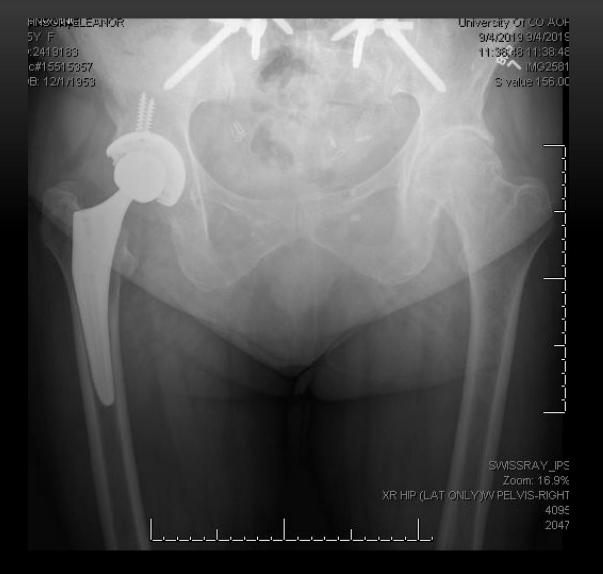






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PROCEEDINGS OF THE HIP SOCIETY 2022 · Volume 38, Issue 7, Supplement, S95-S100, July 2023



Prosthetic Hip Dislocations in Direct Anterior Versus Posterior Approach in Patients With Instrumented Lumbar Fusion

Gregory T. Minutillo, MD $\stackrel{\wedge}{\sim}$ a · Dainn Woo, MD a · Caroline B. Granruth, MD a · Jaret M. Karnuta, MD a · Henry H. Yu, MD b · Charles L. Nelson, MD $\stackrel{\wedge}{\sim}$ a

- 1773 patients (111 with PSF)
- o dislocations in DA versus 4 in posterior
- No statistical difference but trend



PRIMARY ARTHROPLASTY · Volume 32, Issue 6, P1910-1917, June 2017



Total Hip Arthroplasty in the Spinal Deformity Population: Does Degree of Sagittal Deformity Affect Rates of Safe Zone Placement, Instability, or Revision?

Edward M. DelSole, MD 🖰 · Jonathan M. Vigdorchik, MD · Ran Schwarzkopf, MD, MSc · Thomas J. Errico, MD · Aaron J. Buckland, MBBS, FRACS

Affiliations & Notes ✓ Article Info ✓

- Using standard radiographs and EOS 139 THA's in 107 pts.
- Standing images were compared with supine pelvic radiographs to evaluate dynamic changes in acetabular cup position
- Rate of THA dislocation in this cohort was 8.0%, with a revision rate of 5.8% for instability
- 78% had safe anteversion while supine, which decreased significantly to 58% when standing due to increases in spinopelvic tilt
- Among dislocating THA, 80% had safe anteversion, 80% had safe inclination, and 60% had both parameters within the safe zone



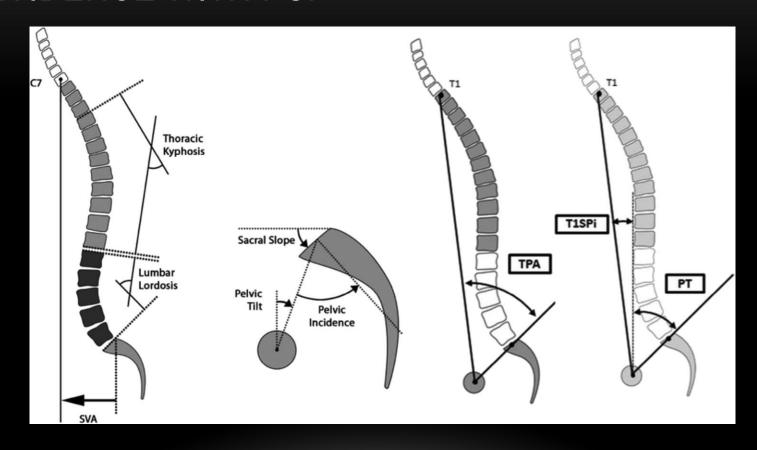




Table 1	Prosthetic	Characteristics	for	Dislocated	Total I	lip Arthrop	lastv.

Dislocation#	Cup Size	Head Size	Skirted Head	Limb Length Discrepancy	Offset			
1	58	36	No	9.7	61.7			
2	56	28	No	-7.5	66.8			
3	56	36	No	-3.9	75.2			
4	62	40	No	15	69.8			
5	52	22	No	1	54			
6	60	34	No	1.3	70			
7	56	28	No	-1.3	70.7			
8	60	32	No	11.8	72.5			
9	50	36	No	-1.1	75.5			
10	58	40	No	-3.2	62.6			
11	52	32	No	4.3	77.6			

All measurements are recorded in millimeters.



PROCEEDINGS OF THE HIP SOCIETY 2021 · Volume 37, Issue 7, Supplement, S566-S570, July 2022



Minimum Five-Year Outcomes of Modular Dual Mobility in Primary Total Hip Arthroplasty

Colin M. Baker, BS · Camilo Restrepo, MD ? · William J. Hozack, MD

- Series of 6 surgeons
- 127 DM bearings
- Average f/u 6.7 years
- 5 hips revised (1 PJI, 1 loosening acetabulum, 3 periprosthetic femur fractures)
- 21 pts had metal ion testing, 5 had Cobalt above normal but all negative MRI's
- Functional outcomes great

