Hip Technology is requisite in 2025

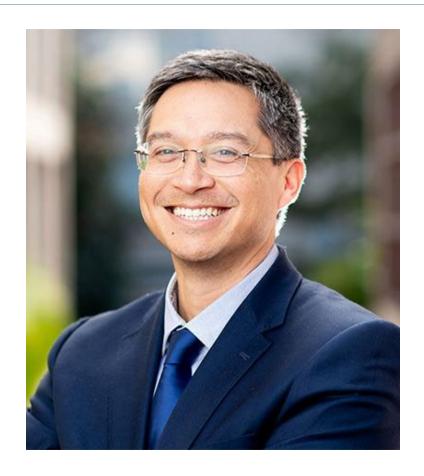
TRAVIS SCUDDAY M.D.

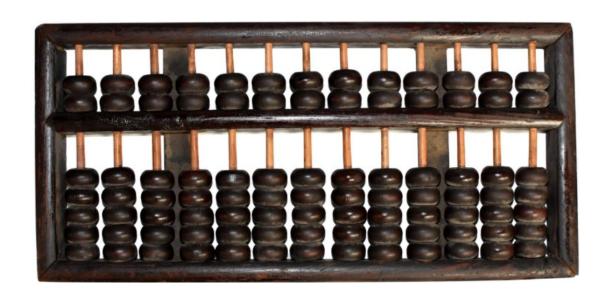
Hoag Orthopedics

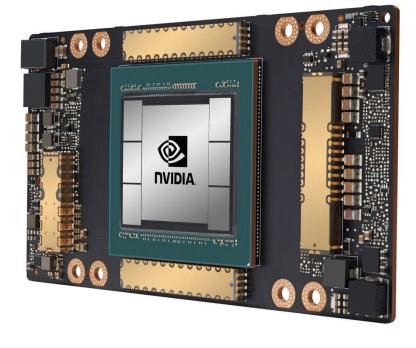
Research • Education • Community Outreach

Disclosures

- Ownership
 - Hoag Orthopedic Institute
 - Main Street Surgery Center
 - Sylke
- Consulting
 - Corin
 - Exactech









Safe zone

•Conventional methods poor at safe zone

- Safe zone isn't safe
- Need personalized safe zone
- Moving target

Table 2. Classification System and Terms Used to Describe Different Spinopelvic Patterns

Туре	Synonyms	Description	Definition	Component Targets	
1A	Normal Flexible-balanced ³⁰	Normal sagittal alignment Normal motion	Alignment: PI-LL <10° or standing APP <10°-13°	Cup anteversion 15°-25° Combined anteversion 30°-45° Standard target ^a	
			Motion: ΔSS >10°		
1B	Rigid-balanced ³⁰ "Stuck-standing" ²⁷	Normal sagittal alignment Decreased spinopelvic motion	Alignment: PI-LL <10° or standing APP <10°-13°	Cup anteversion 25°-30° Combined anteversion 40°-50° Avoid decreased cup inclination	
			Motion: ΔSS <10°		
2A	Flexible-unbalanced ³⁰ Flatback deformity ²⁸	Loss of lumbar lordosis Standing posterior pelvic tilt Normal motion	Alignment: PI-LL >10° APP posterior tilt >10°-13°	Cup anteversion 20°-30° Combined anteversion 35°-45° Avoid excessive combined anteversion	
			Motion: ΔSS >10°		
2B	Rigid-unbalanced ³⁰ Stiff flatback deformity ²⁸ "Stuck-sitting" ²⁷	Loss of lumbar lordosis Standing posterior pelvic tilt Decreased spinopelvic motion	Alignment: PI-LL >10° APP posterior tilt >10°-13°	Cup anteversion 20°-25° Combined anteversion 40°-45°	
			Motion: ΔSS <10°	Avoid excessive combined anteversion	



Computer-Assisted Navigation Is Associated with Reductions in the Rates of Dislocation and Acetabular

Com	TABLE 3 Analysis of the anteversion	Analysis of the anteversion angle and the inclination angle 3 months after surgery.							
	Variate	Index statistics	Experimental group	Control group	Statistic value	p value			
Daniel D. Bohl, M	Anteversion angle (°)	N (missing) Mean (SD) Median (Q1, Q3)	58 (4) 19.5 (5.1) 20.2 (15.8, 22.9)	55 (7) 22.7 (7.2) 23.1 (17.8, 28.2)	-2.74ª	0.01			
	Inclination angle (°)	Min, max N (missing) Mean (SD)	8.3, 32.5 58 (4) 40.4 (4.9)	4.5, 34.0 55 (7) 41.0 (5.8)	-0.57ª	0.57			
The Use of Arthroplast	Anteversion angle in the safe zone (%)	Median (Q1, Q3) Min, max N (missing)	40.0 (37.0, 43.0) 32.4, 51.9 58 (4)	40.4 (35.8, 46.3) 29.7, 53.9 55 (7)	24.58 ^b	0.00			
Arthroplast		Yes No	55 (94.8%) 3 (5.2%)	30 (54.5%) 25 (45.5%)					
A Ct. 1 C C 012	Inclination angle in the safe zone (%)	N (missing) Yes No	58 (4) 57 (98.3%) 1 (1.7%)	55 (7) 53 (96.4%) 2 (3.6%)	0.40 ^b	0.53			
A Study of 6,912 A	Both in the safe zone (%)	N (missing) Yes No	58 (4) 54 (93.1%) 4 (6.9%)	55 (7) 28 (50.9%) 27 (49.1%)	25.25 ^b	0.00			
Sujit Agarwal, MBBS, M Andrea Peng, MMed(Epi&	Abbreviation: SD. standard deviation.; ^a Tw	o-tailed independent t-test.:							

Primary Hip

Can Robot-Assisted Total Hip Arthroplasty Improve the Incidence of Self-Reported Leg-Length Discrepancy? A Multicenter, Propensity Score Matching Comparative Study

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^{*} Joint & Ankle Section, The Second Affiliated Hospital of Xi'an Jiaotong University, Xi'an, China

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Step cut required
 Imaging older than 6 months



Supine-to-stand -8°

Stand-to-seated +46° Standing PT +1°

Lumbar flexion N/A PI-LL mismatch N/A Supine cup inclination 45°

Supine cup anteversion 24°

Operative hip is 7 mm short pre-operatively

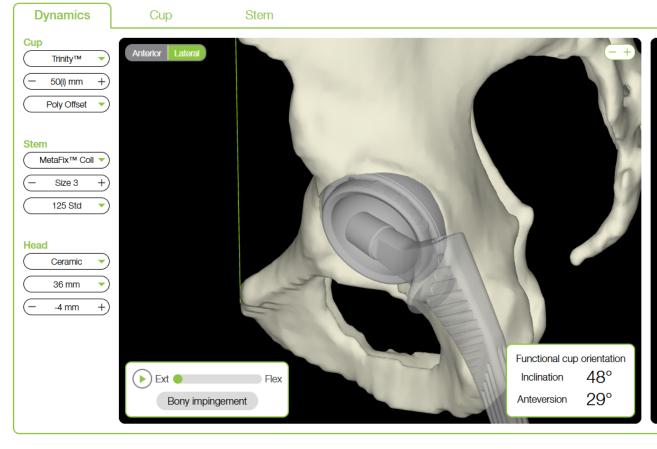
Lengthening 4 mm

Stem version (native) 23° (17°)

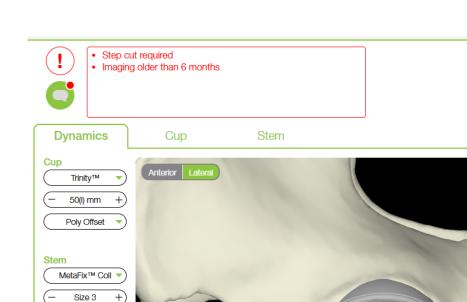
Offset change +9 mm

Advanced ▼

.







Supine-to-stand -8° Supine cup inclination

Stand-to-seated +46° — 45° +

Standing PT +1° Supine cup actualisms

N/A

N/A

Lumbar flexion

Functional cup orientation

Inclination

Anteversion

40°

-4°

PI-LL mismatch

Operative hip is
7 mm short
pre-operatively

Lengthening 4 mm Stem version (native) 23° (17°)

Offset change +9 mm



125 Std

Ceramic 36 mm

Ext

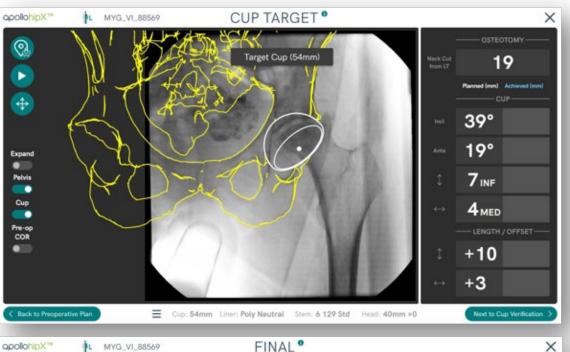
Bony impingement

Flex

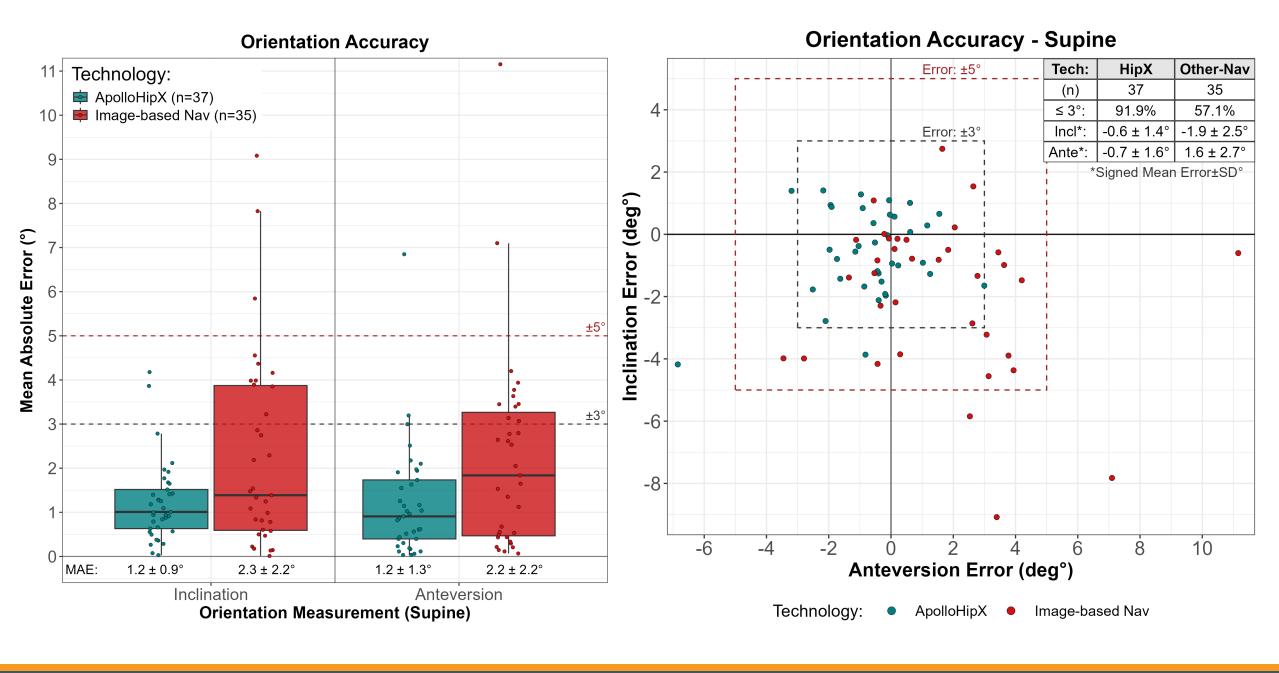
Head

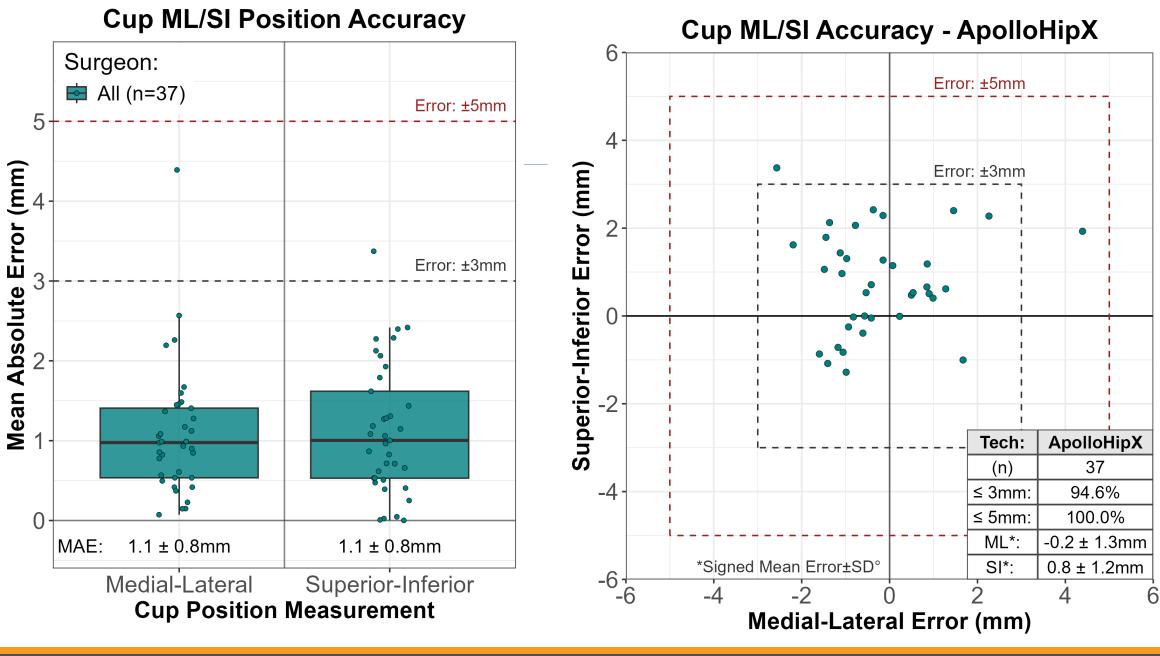












Conclusions

- Personalized safe zone
 - Tough to hit
- Decreased leg length discrepancy?
- Time neutral
- Defendable

