Clinical Outcomes For Hip Arthroscopy Performed On Patients With Pre-Operative Radiologically Established Osteoarthritis

Jon Conroy & Colin Holton
Harrogate District Hospital, UK

Harrogate and District NHS
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Disclosures

- Jon Conroy

  I have financial relationships with the following companies:

  Consulting- Stryker
  Conmed
  Surgical Innovations

  Royalties - Invibio

- Colin Holton - None

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Introduction

- Recent literature reveals Hip arthroscopy in patient with established OA derive moderate to large benefit following hip arthroscopy (Kemp JL 2014 CORR).
- Greater improvement post surgery for patients with no OA, when compared to patients with OA pre-operatively (Eggerton & Philipon).
- Other studies reveal worse outcome in patients with OA & FAI following hip arthroscopy (Kemp JL 2012 Br J Sports Med)
- No clear consensus in current literature as to whether to operate or not on pre-operative established osteoarthritic patients

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Aims

- To investigate the potential benefit of hip arthroscopy in patients who have established articular damage with femoral acetabular impingement on pre-operative magnetic resonance imaging (MRI).

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Methods

- A prospectively collected database of over 200 hip arthroscopies performed over a 3 year period by a single surgeon in a district general hospital in the United Kingdom
- Modified Harris Hip score (MHHS), Non-arthritic Hip score (NAHS), SF-36 and UCLA score where performed at the following intervals; pre-operatively, 6 weeks, 3 months, 6months, 1 year and 2 years
- All patients underwent pre-operative MRI arthrograms
- Patients with no radiological pre-operative osteoarthritis were compared to those with radiological established pre-operative osteoarthritic changes

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Results

- Study group demographics (Group 1 – OA on pre-op MRI arthogram vs Group 2 – No OA on pre-op MRI arthogram)

	Group 1	Group 2
Total number of patients	68	143
Average Age (years)	34.4	35.6
Average Follow-up (months)	19.4	17.9
Male:Female ratio	1:2.5	1:2.4

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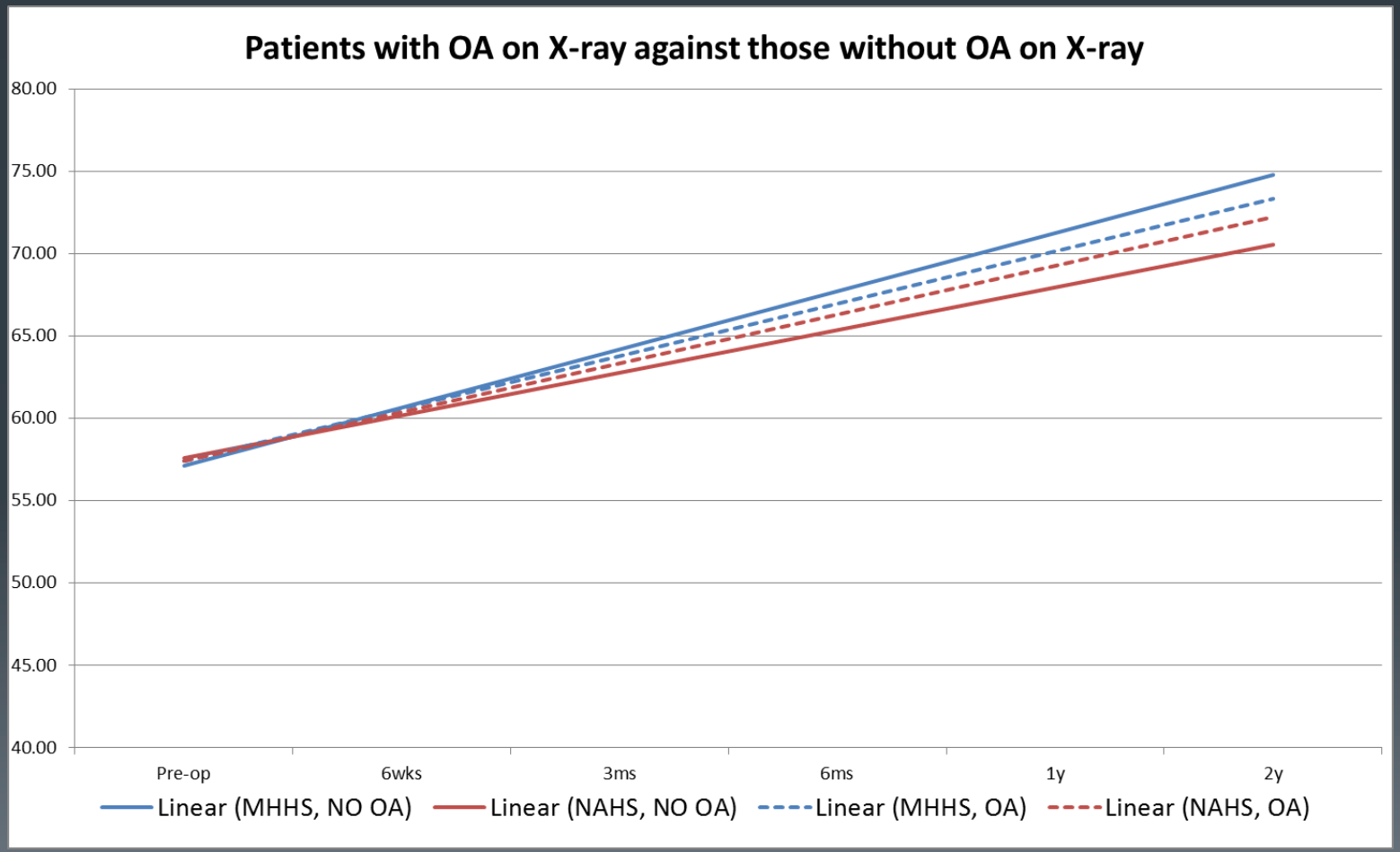
Results



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Results

- Improvement in post-operative scoring methods was noted at all time periods post-operatively in the non-arthritic and arthritic groups.
- The most significant improvement was noted in the non-arthritic groups MHHS score post operatively.
- NAHS score improved by a greater margin in the arthritic group compared to the non-arthritic hip group at 2 year follow-up.

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Discussion

- Hip arthroscopy for FAI in patient who are under the age of 50 and have already established articular damage on MRI provides a good clinical outcome in the short term.

- Drawbacks
  - We have not reviewed out outcomes with regards to THR as final outcome as we do not have long-term outcome data
  - We did not measure the pre-op duration of symptoms compared to outcome results
  - We did not account for different surgical procedures performed at time of hip arthroscopy

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Conclusions

- Regardless of surgical procedure at Hip Arthroscopy patients with established radiological OA pre-operatively had similar improvement in short-term patient outcome results compared with a control group (no OA on pre-op radiographic imaging).

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