

6 years follow-up of hip revision surgery

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Abstract

Revision total hip arthroplasty often presents surgeons with difficult bone loss problems. The purpose of this study was to evaluate the results of hip revision surgery according to bone stock. We evaluated, in a retrospective study, 148 hip revision surgeries during 2004 to 2010. The Harris Hip Score (HHS), the acetabular cementation, the AAOS classification, the SOFCOT 99 bone loss grading and Barrack classification were used for clinical and radiological assessment. It can be observed significant improvement of HHS from a mean value of 45 preoperatively to 77.2 points postoperatively. Grade B acetabular cementation was observed in a significantly higher rate for situations that needed acetabular allograft reconstruction and where it cannot be performed because of allografts lack. Barrack grades C and D cementation were associated with 70% of SOFCOT 99 stage III and IV cases and only 5% of SOFCOT 99 stage 0-II cases. Using bone graft seems to be a reliable solution for restoring bone stock and stabilizing the cup in revision total hip arthroplasty with type II-IV acetabular defect according to the AAOS classification. Because SOFCOT 99 stages III-IV are often associated with poor cementation we prefer using uncemented distally fixed with screws revision stems for these cases.

Key words: hip revision, graft reconstruction, prosthetic survival

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