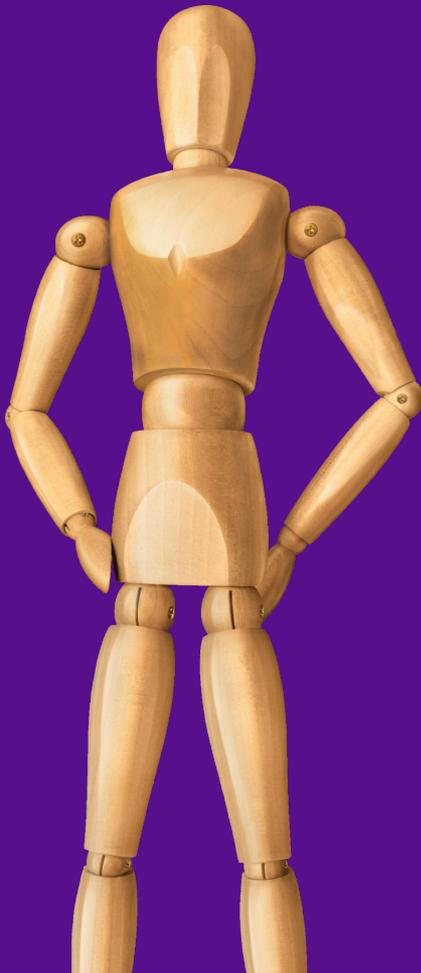


Independent Risk Factors for Poor Outcome after Hip Arthroscopy: Results after minimum two-year follow up in 258 patients



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Disclosures



- Consultant (TY)
 - Arthrex
 - Smith and Nephew

Introduction



- Hip arthroscopy increased 18x from 1999-2009
 - *Colvin, JBJS 2012*
- Why?
 - Increased awareness of hip pathology
 - Radiologic advances (MRI, diagnostic injections)
 - Increase exposure/training during residency/fellowship
 - ***Expanding indications***

Predictors of poor outcomes



- Arthritic changes
 - Tonnis grade 2 or greater
 - Joint space $< 2\text{mm}$
- Older age
- Longer duration of symptoms
 - > 1.5 years
- Worse pre-operative mHHS



Methods



- **Prospectively-collected data** from patients who underwent **primary hip arthroscopy** by single **sports fellowship trained surgeon**
 - Collection period: 2009 – Present
- Database with *demographic, surgical, and outcome data*
- Patient reported outcome (PRO) scores
 - **mHHS (Modified Harris Hip Score)**



Statistical Analysis



- SAS[®] version 9.3 (SAS Institute, Cary NC) used for statistical analysis
 - Continuous variables analyzed with Student's T-test
 - Categorical variables evaluated with the Fisher Exact test or Chi-squared analysis
- P-values <0.05 were considered statistically significant for all calculations.
- Poor outcome defined as requiring revision procedure, conversion to THA, or mHSS < 70
- Multivariate logistic regression was performed to identify independent risk factors for “poor outcome”

Results



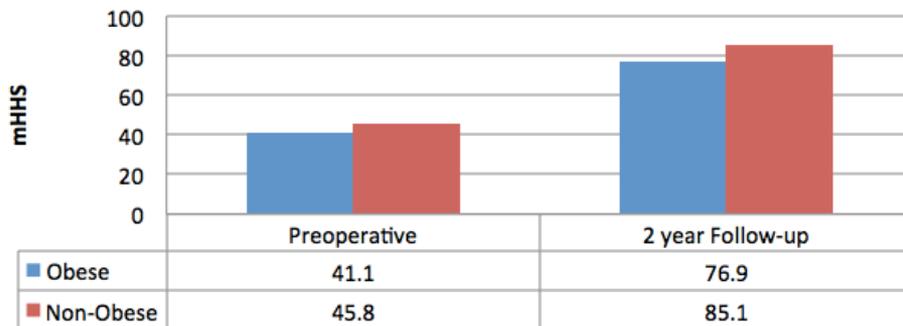
- 70 patients in study population who met criteria for “poor outcome” at two years
 - 43 revised or converted to THA (61%)
 - 27 reported mHSS < 70 (39%)
- Compared to 188 patients defined as success at two years
- For the 258 patients included mHSS improved from an average of 49.6 to 83.6 at two years resulting in mean improvement of 34.1 ($p < 0.001$)



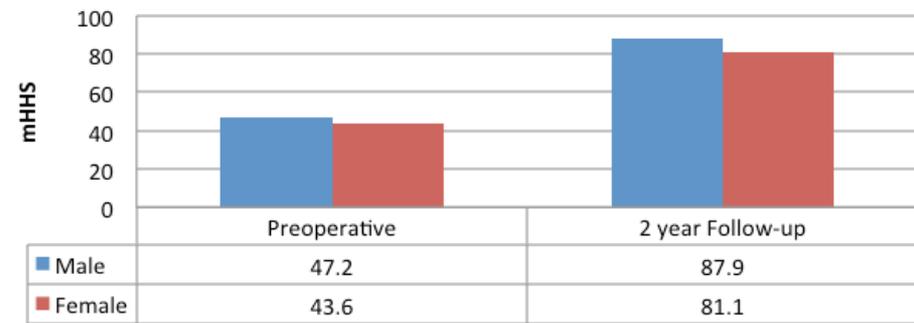
Independent risk factors

- Obesity (OR 2.1; $p=0.04$)
- Pre-operative mHHS < 40 (OR 3.34, $p<0.001$)
- Female gender (OR 1.79; $p=0.03$)

mHHS differences by BMI



mHHS differences by Gender



Discussion



- Statistically significant improvements in mHHS and NAHS at two-year follow-up
- Consistent with previous reports of poorer outcome at two-year follow-up in:
 - Females
 - Patients with lower pre-operative hip scores
 - Obese patients

Conclusion



- Hip arthroscopy can lead to favorable outcomes in the appropriately selected patient
- The authors used strict criteria to define poor outcomes after hip arthroscopy including requiring any revision procedure, conversion to THA, or post-operative 2-year mHSS < 70
- Further prospective trials are required to further narrow the focus on appropriately selected patients for this surgical modality
- Surgeons should discuss the possibility of requiring revision surgery or conversion to THA especially in females, obese patients, or those with pre-operative mHSS lower than 40

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