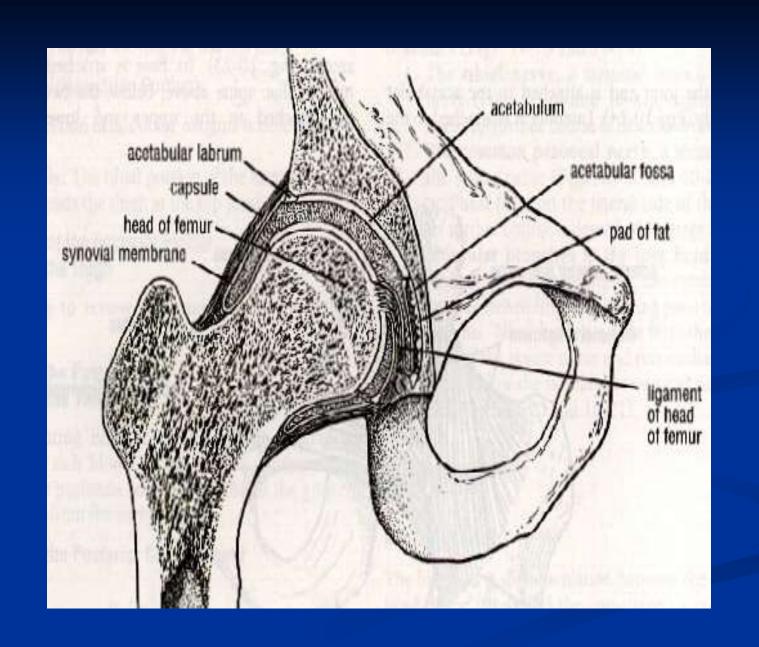
Andy Murray and Other Hips

The Good the Bad and the Ugly

Mr K J Drabu
Trauma and Orthopaedic Consultant



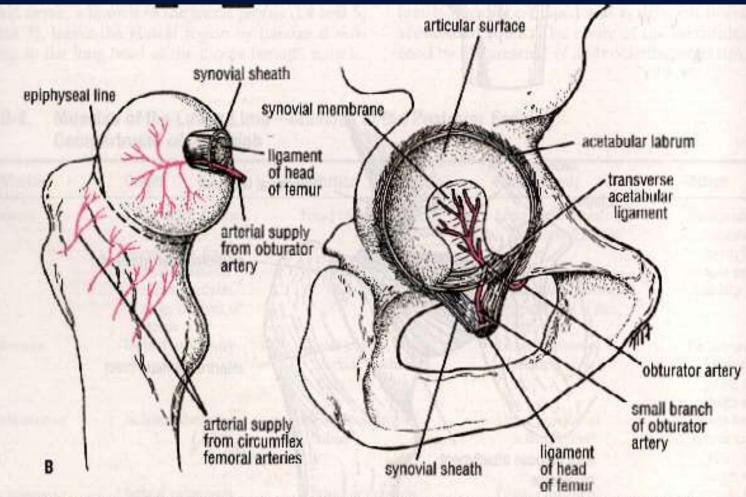


FIGURE 10-24 (A) Coronal section of the right hip joint and (B) articular surfaces of the right hip joint and arterial supply of head of femur.

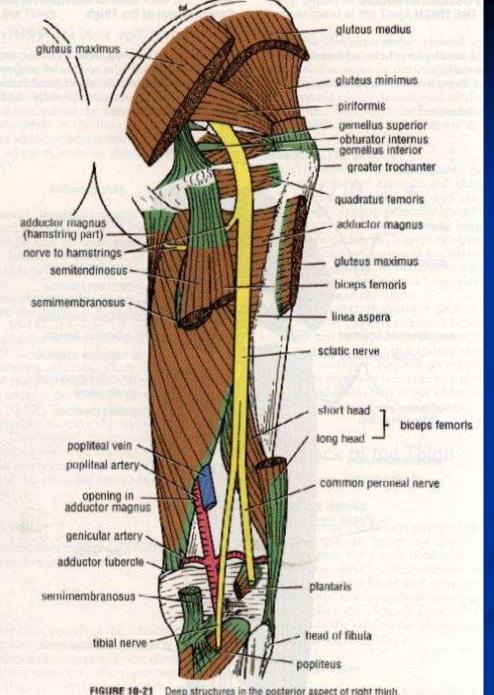


FIGURE 18-21 Deep structures in the posterior aspect of right thigh.



Arthritis with AVN



Osteoarthritis

- 1. Condition affecting elderly females more than males
- 2. Pain and stiffness with limitation of ADL
- 3. 80,000 THRs performed per annum in UK
- 4. Loss joint space, sclerosis, osteophytes, cysts
- 5. Initial treatment conservative
- 6. THR one of the most successful elective operations
- 7. Comps Infection, dislocation, late aseptic loosening
- 8. Life expectancy of THR may be 80% at 20 25 years
- 9. In the younger patient maybe due to dysplasia

Symptoms from an Arthritic Hip

Groin pain

Thigh Pain

Knee Pain

Gluteal and Back Pain

Stiffness



Rheumatoid Arthritis

- 1. Multi-system disease
- 2. Pain and stiffness
- 3. Loss of joint space, peri-articular osteoporosis
- 4. Late OA changes
- 5. Drug management for early disease
- 6. THR is successful but be aware of late sepsis

Avascular Necrosis

- 1. Bone death due to inadequate blood
- 2. Causes: Alcohol/Steroids/Sickle/Bends
- 3. Maybe relatively painless but progressive

Treatment
THR or Hip Resurfacing??

How long does a hip last?



Types of Hip Replacements

Cemented

Non-cemented

Hip Resurfacing

All hips are made of metal

It is the bearing surface that matters – Ball and socket liner

How long does a hip last?



Progress? This needed re-doing (revising at 3 days!!!)



National Joint Register

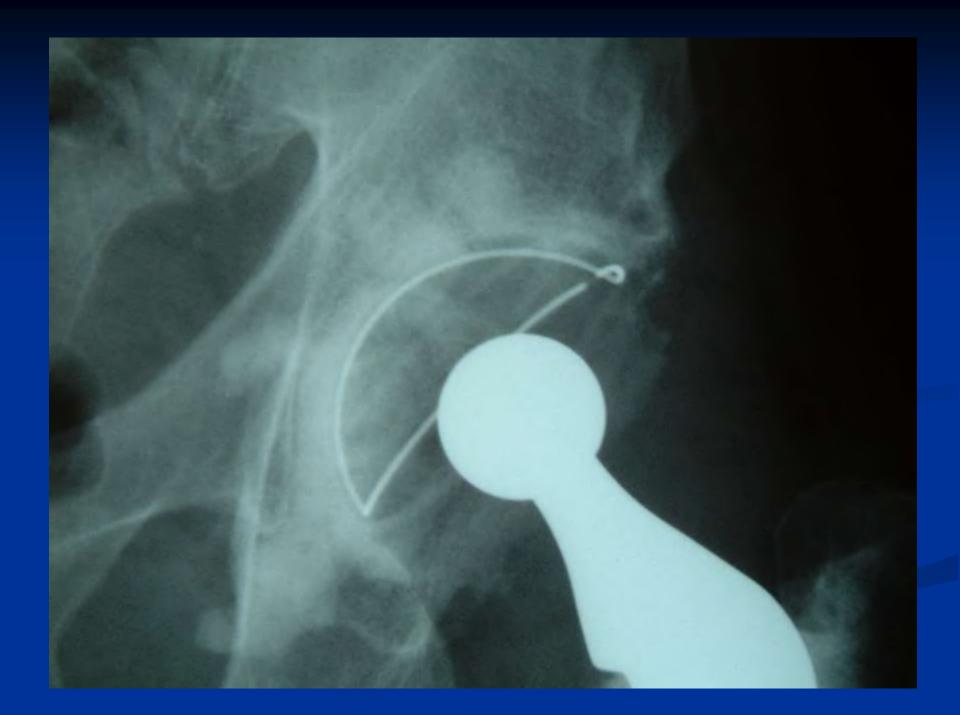
- All joints
- All types of hips
- All surgeons
- All hospitals
- Results successes and failures
- ODEP Rating 10 A Plus 15 A Plus

NHS Constraints £££!!!

Present to GP with MS Problem
GP sends to MSK – Physios and ESP
Physios treat and advised not to refer forwards
Jump over a barrier/hurdle to see specialist
Further destruction of joint
Delay in receiving appropriate surgical opinion
Poorer end result
Consider C&B if not Privately Insured







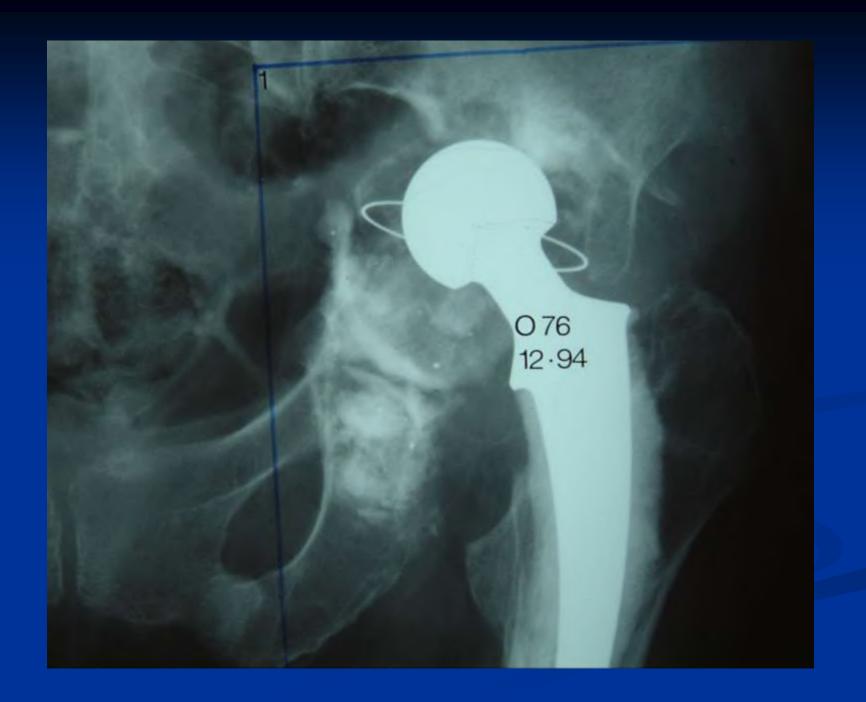


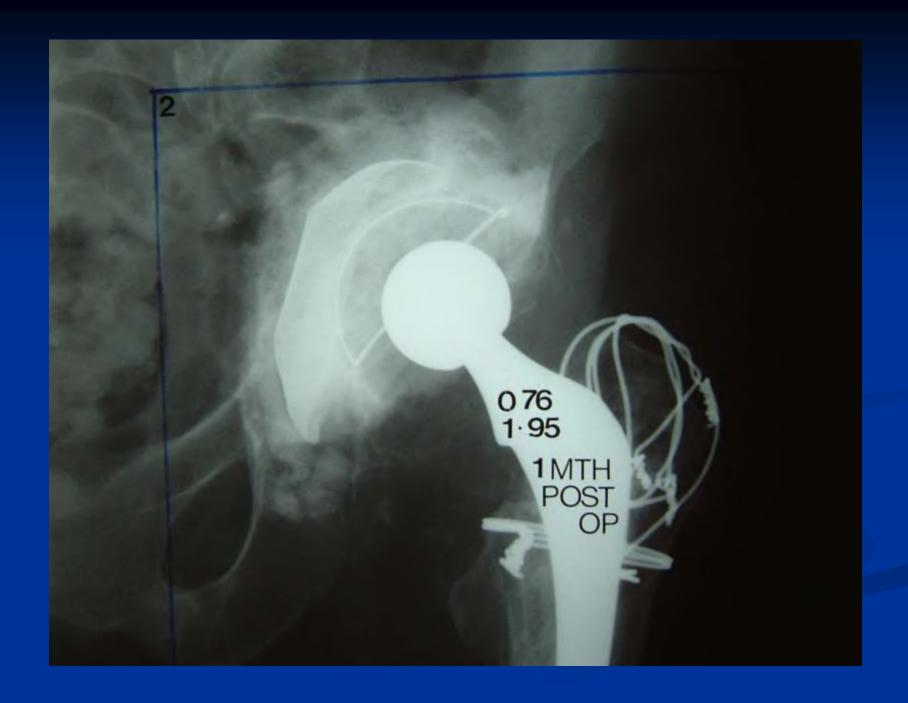


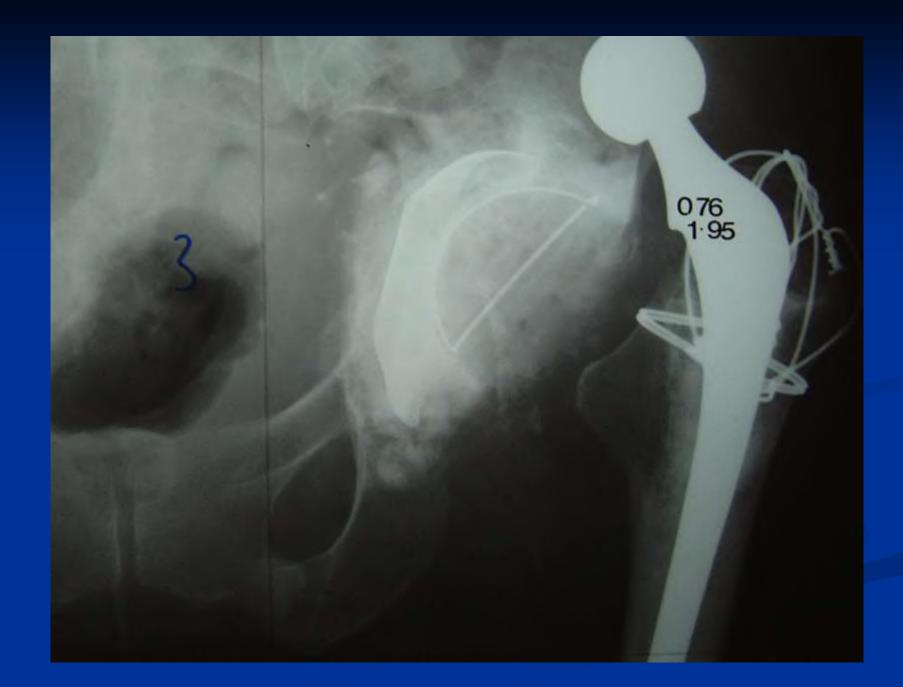


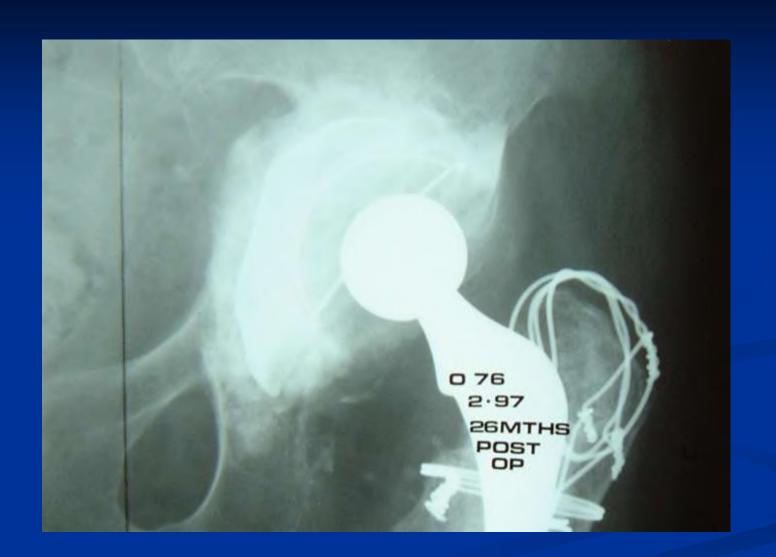




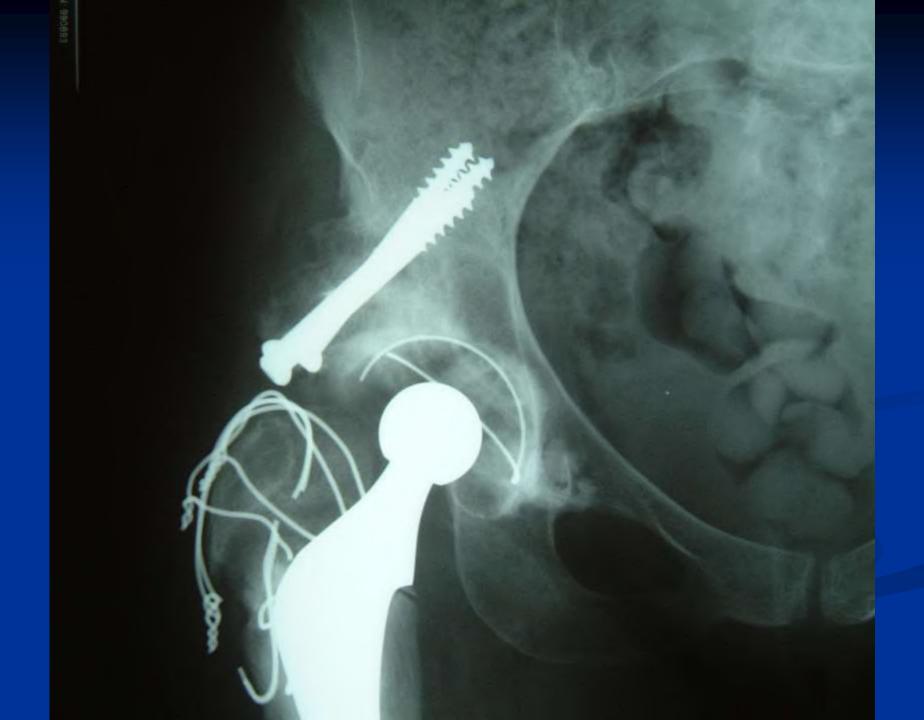










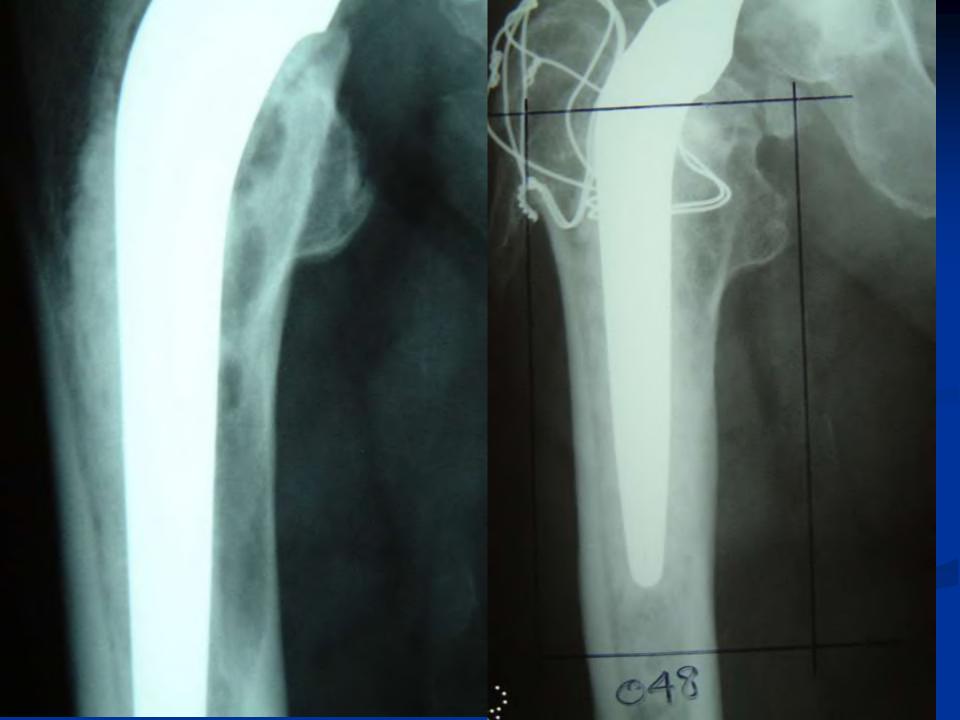


















The High Demand Patient

Sports
Younger patient
Impact activities

? Hip Resurfacing (Birmingham/ASR)

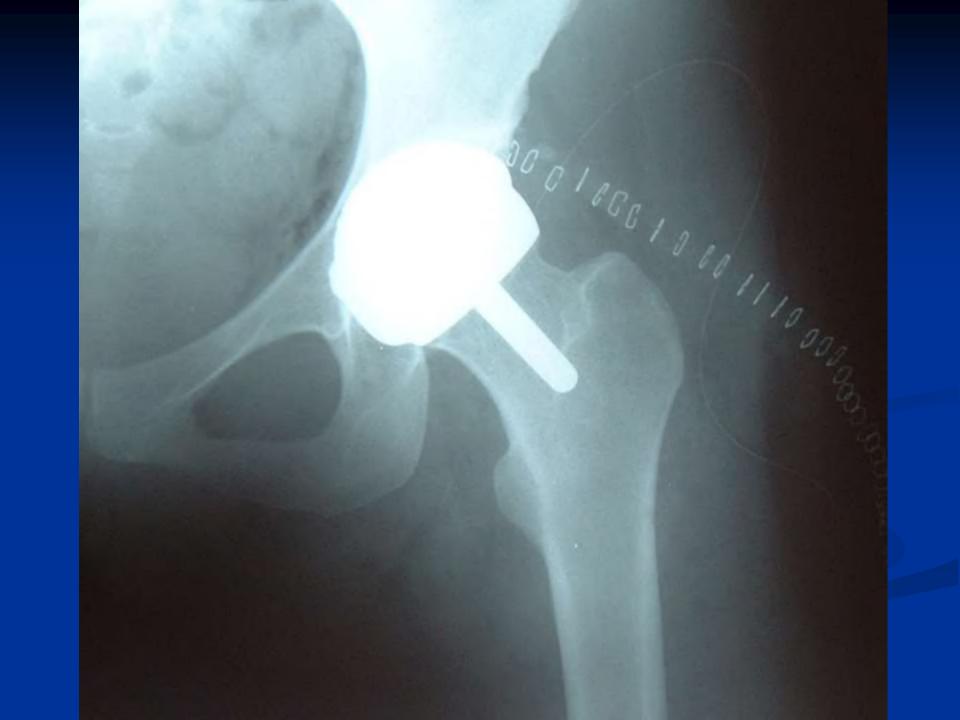














Why a Hip Resurfacing v THR

Less bone removed

Better chance of returning to previous level of physical activity

Possibly easier to re-do in the future

Why NOT a Hip Resurfacing

Excessive metal wear!!!!



Metalossis and Pseudotumour





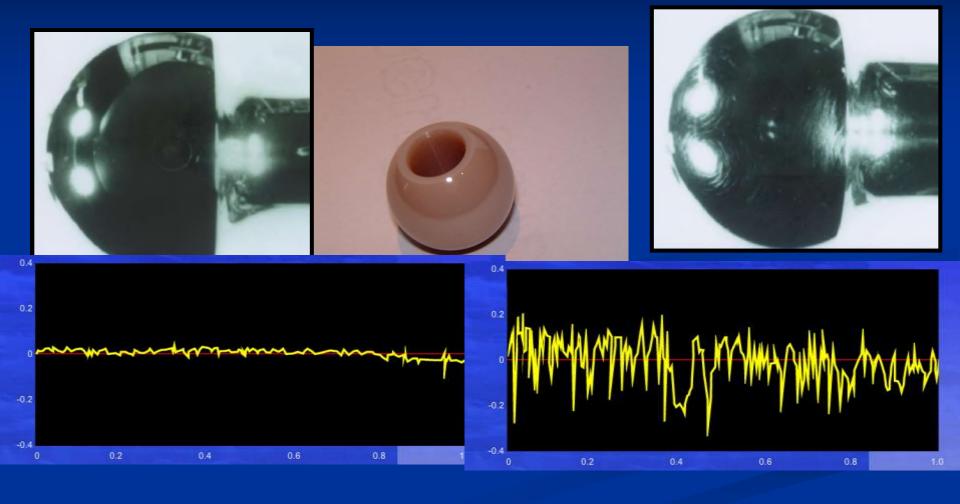
Fluid from Metalossis

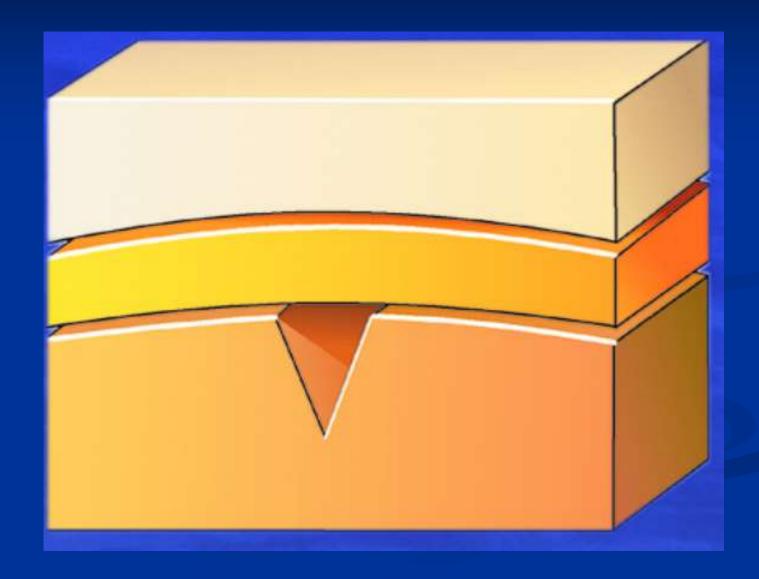














Mini Incision THRs

Definition

- Small 2 cms greater than cup
- Small 10 cms or less

True Definition

- Small incision/s
- Minimal disturbance of soft tissues

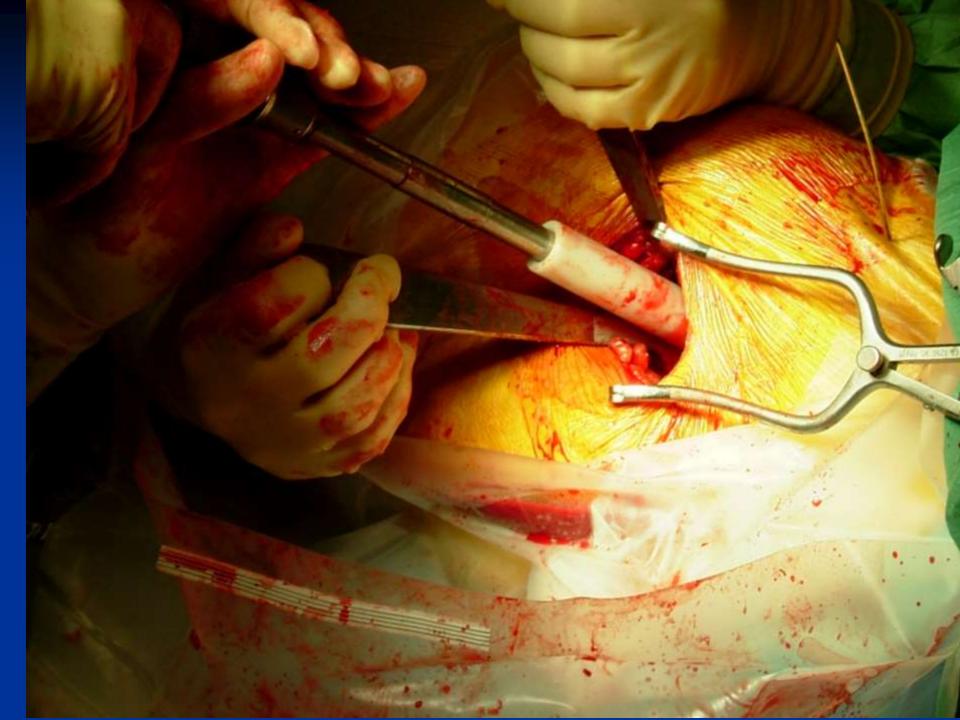
Mini Incision THRs

Theoretical Advantages

- Less disruption of soft tissues
- Quicker rehabilitation
- Less blood loss

Possible Disadvantages

- Less visualisation
- Risk of complications
- Not for Hip Resurfacings







Joint Replacement Surgery

Pain Free

Mobile

Long Lasting

Minimal Complications

Enhanced Recovery

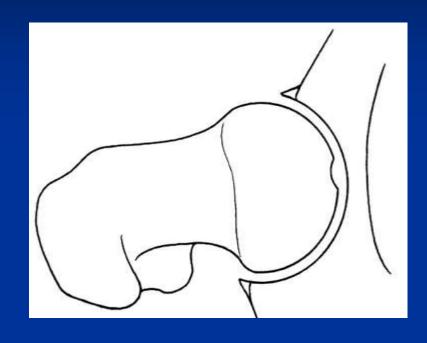
- Available to all patients
- PAC and Physio Input
- Patient involved in their own rehabilitation
- Admit DoS
- Spinal (2-4 Hrs)+/- Sedation
- MIS (85%) BMI
- Up same/next day
- Discharge AVLOS 3 days (1-6 days)

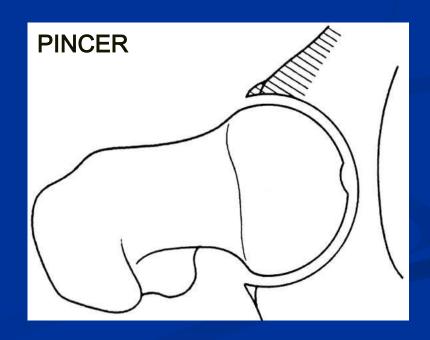
Enhanced Recovery

- Home day 3 (1-6 days)
- 2 sticks Stairs Chair Dress
- 2 weeks One stick
- Driving 4 weeks
- Normal at six weeks (85%)
- Golf cycling 2 3 months
- Skiing and impact activities 6 12 months
- Work 2 months

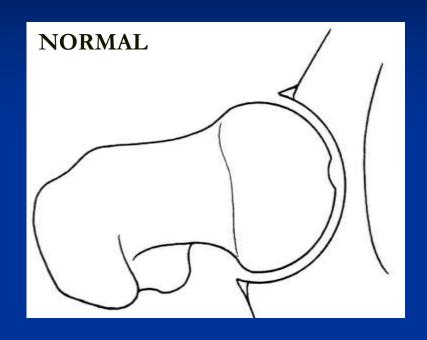
ORMAL

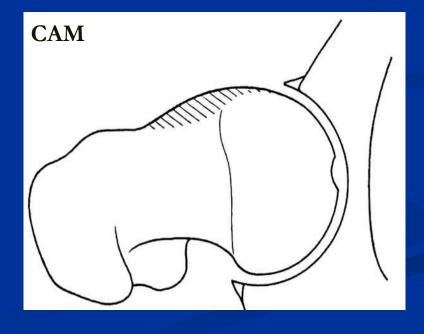
Hip Arthroscopy





Hip Arthroscopy





Hip Arthroscopy

- Specific Indications
- Diagnosis and diagnostic tools limited
- Impingement and Labral Pathology
- 15 20% made worse
- Patient satisfaction poor
- May require further more complex surgery

We also do knees





Thank You

Contact

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ANY QUESTIONS???