Yoshihiro Nakamura et al., Orthop Muscular Syst 2017, 6:3 (Suppl)
DOI: 10.4172/2161-0533-C1-036

Morselized bone grafting in total hip arthroplasty with dysplastic hip: Effectiveness of Protrusio technique

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Total hip arthroplasty is a standard treatment for patients with symptomatic osteoarthritis secondary to developmental dysplasia of the hip. Better long-terms survival has been observed among patients who have undergone anatomical hip reconstruction. However, as a result of deficient acetabular bone loss, autogenous bone grafting was performed to improve acetabular coverage. In acetabular reconstruction in patients with dysplasia at our institution, we routinely place the cup at the anatomical hip center or slightly high hip fixation aiming at cup-CE angle 0 degree. The purpose of this study was to evaluate the 5 to 11-year follow-up result of dysplastic hip with cementless cup without bulk bone or reconstruct ring. There were 101 primary THA. We examined the clinical and radiographic evaluation. Cup coverage and hip center were measured as cup-CE angle and horizontal and vertical distance. The minimum cup-CE angle was -2° (mean, 20.3°) and tended to be high hip center and many bone grafts. No cup revisions were required and there was no radiographic loosening. All cases use morselized bone only and no need for bulk bone. Low CE angle, even if lower than 0°, as long achieved good press-fit fixation, not only long-term results are obtained, remodeling of the bone can be expected.

Biography

Yoshihiro Nakamura is a Surgeon of Orthopedics, his specialty are Trauma and Critical Care. Currently he is working at University of Miyazaki Hospital as a Research Associate in Trauma & Critical Care Center.

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