Hip Arthroscopy Survivorship: A Population-based Study

Heidari KS¹, Heckmann N¹, Pannell WC¹, Hill JR¹, McKnight B¹, Vangsness CT¹, Hatch GFR III ¹
¹Department of Orthopaedic Surgery, Keck School of Medicine of the University of Southern California

INTRODUCTION

Hip arthroscopy has grown in popularity in recent years as a way to treat femoracetabular impingement, symptomatic labral tears, etc. The objective of this study is to examine survivorship following hip arthroscopy, defined by conversion to an arthroplasty, and to identify risk factors for failure.

METHODS

- Deidentified data from hospitals, ambulatory surgery centers, and emergency departments was obtained from the California Office of Statewide Health Planning and Development database¹
- Exclusion criteria: trauma, infection, rheumatologic disease, congenital deformities, malignancy, or concurrent arthroplasty
- Failure was defined as conversion to total hip arthroplasty (THA)
- Univariate and multivariate analyses performed
- Kaplan-Meier curves were constructed to estimate survivorship

RESULTS

Survivorship with obesity:
- 5-year survivorship: 59.3% (CI = 51.0% to 66.6%)
- Survivorship with osteoarthritis:
  - 5-year survivorship: 45.6% (CI = 42.1% to 49.0%)
  - 10-year survivorship: 24.7% (CI = 11.9% to 40.0%)

CONCLUSION

Older age, obesity, and a diagnosis of osteoarthritis at the time of surgery associated with increased risk of conversion to arthroplasty.

Careful consideration should be taken when considering this procedure in older patients.