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Introduction

- ❑ Elderly femur neck fractures (FNF) are becoming a major cause of patient morbidity and mortality, putting a strain on the global healthcare systems
- ❑ Volume of THA has increased markedly over the past few decades, making it one of the most frequently performed orthopedic hip procedures globally for elderly (>65 years) FNFs
- ❑ Femur morphology plays a vital role in selecting the technique of femur stem to be used

Aims & Objectives

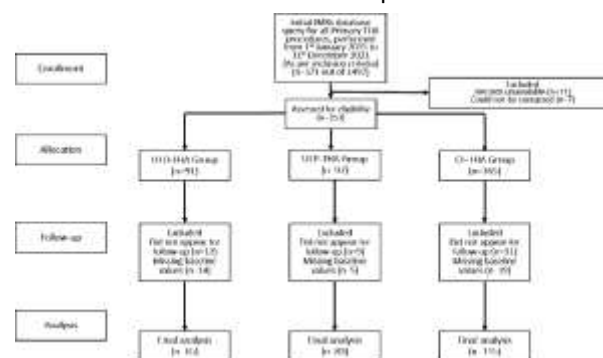
- ❑ To compare the postoperative outcomes and postoperative adverse events (POAEs) of three different THA techniques
- ❑ **Group 1** – Uncemented Primary Proximal metaphyseal-fitting Stem THA group (UFP-THA) - type 1 single wedge stem
- ❑ **Group 2** – Uncemented Diaphyseal-fitting stem THA group (UFD-THA) - type 3B Tapered spline/ cone stem
- ❑ **Group 3** – Cemented THA group (CF-THA) - collarless polished taper cemented femoral stem hybrid THA

Material & Method

- ❑ Retrospective Propensity matched comparative study
- ❑ Institutional electronic medical records database was inquired for elderly patients aged 65 years and above, with Dorr type B femur morphology, who underwent Primary THA for Acute (≤ 1 week) displaced FNF from 1st January 2015 till 31st December 2021, with a minimum follow-up of 2-years

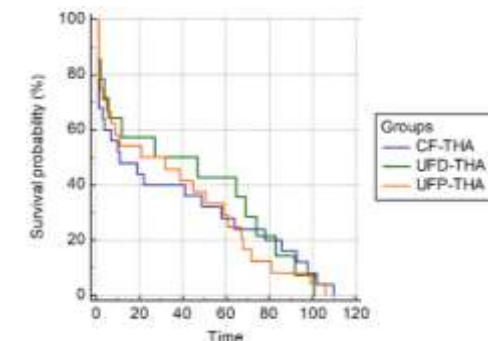
Result

- ❑ Mean follow up 5.82 years
- ❑ 47 POAEs were noticed (9:23:15; UFD-THA: UFP-THA: CF-THA)
- ❑ No significant difference in mortality was noticed in the three groups from 1-week till the final follow-up



Discussion

- ❑ The principal finding of this study is that UFD-THA gives equivocal PROMs in terms of OHS, EQ-5D, FJS-12, and POAEs as CF-THA in elderly patients with Dorr type B morphology. However, UFD- and CF-THA are statistically significantly superior to UFP-THA concerning POAEs.



Conclusion

- ❑ Results of the UFD-THA group were comparable, to those of the CF-THA group; thereby, this study gives comprehensive perspectives to achieve shared decision-making about the use of UFD-THA as a preferred stem option in elderly FNF with Dorr type B femur cases, especially in patients with high risk for BCIS.