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Indications and Results of Hip Arthroscopy in 288 Consecutive Patients with a Minimum Follow-Up of 6 Months

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Objectives: We present the indications and results of hip arthroscopy of a series of 288 consecutive patients with a minimum follow-up of 6 months (to 4 years).

Methods: 288 patients underwent hip arthroscopy between 2009 and 2013. Forty patients were lost in follow-up. For the clinical assessment of the remaining 248 patients, we used the modified Harris Hip Score (mHHS) pre-operatively and at 3, 6, 12, and 24 months post-operatively. We documented patients in respect to age (mean age was 36, range 16 to 68), sex (178 males, 70 females), indication for arthroscopy (159 femoroacetabular impingement-FAI, 37 osteoarthritis-OA, 15 diagnostic, 10 for osteonecrosis-AVN, 6 post-traumatic(fracture-dislocation), 15 for traumatic labral tear, 5 for synovial osteochondromatosis and one for post-op adhesions), the correlation of pre-operative imaging and arthroscopic findings, surgical time, use of image intensifier and complications. The patient was placed in lateral position in 105 cases and supine in 143 cases.

Results: In the majority of patients, FAI was the primary diagnosis where the mHHS showed an improvement from 51 to 92 post-operatively. In 37, OA was the primary diagnosis; 16 required joint replacement within 14 months post arthroscopy. In OA, joint space less than 2 mm and presence of bone edema of the femoral head in the pre-operative MRI were poor prognostic factors. In ten out of 15 patients diagnostic chondral injuries were present. Complications: One transient femoral nerve palsy, one superficial wound infection, two cases of instrument breakage within the joint which were successfully removed without sequelae and one inability to access safely the central compartment.

Conclusion: The main indication for hip arthroscopy today is FAI. With proper indications, hip arthroscopy can significantly improve patient's symptoms in most cases.

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