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Boston
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Arthroscopy, Knee Surgery and
Orthopaedic Sports Medicine

HIGH CURE RATE IN HEMATOGENOUS TKA PJI AT A LONG-TERM FOLLOW-UP BY MEANS OF DAIR PROCEDURE

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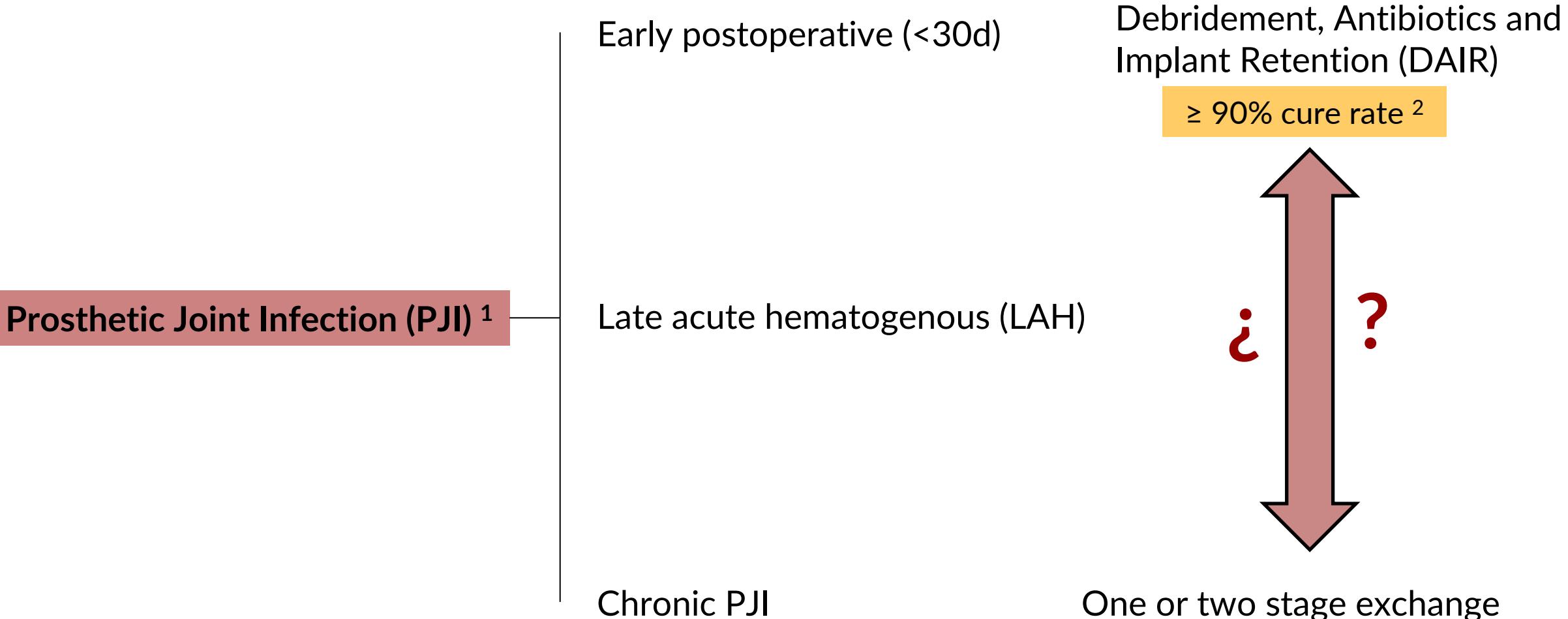
DISCLOSURE



The author declare that there is no conflict of interests.



INTRODUCTION



¹ Zimmerli W, Trampuz A, Ochsner PE. Prosthetic-joint infections. *N Engl J Med* 2004;351(16):1645–1654.

² Zhang C-F, He L, Fang X-Y, Huang Z, Bai G-C, Li W-B, et al. Debridement, Antibiotics, and Implant Retention for Acute Periprosthetic Joint Infection. *Orthop Surg* 2020;12(2):463–470.

OBJECTIVE

Report the cure rate of LAH PJI following TKA treated by means of DAIR at long-term follow up,



DAIR provides a high cure rate in LAH PJI with functional outcomes comparable to non-infected cases.

MATERIALS AND METHODS

Prospective study

Single center

TKA performed between 2005 and 2010

Exclusion Criteria

History of infection in the knee

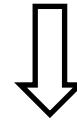
History of allergy to ALBC

Minimum follow up 12 months

TKA



Diagnosis of PJI ¹



Treatment

DIAGNOSIS OF PROSTHETIC JOINT INFECTION (PJI)

*Zimmerli criteria (*Prosthetic-Joint Infections*. NEJM. 2004)

- Sinus tract.
- Purulent discharge.
- Synovial Fluid: ≥ 1.700 PMN/mm³ or $> 65\%$ PMN.
- ≥ 2 positive cultures (x3 intraoperative tissue specimens).
 - Histopathological studies ≥ 5 PMN/HPF

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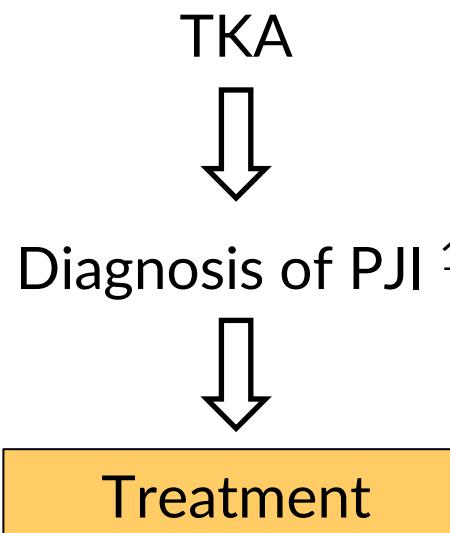


MATERIALS AND METHODS

Prospective study

Single center

TKA performed between 2005 and 2010



Failure rate

- Knee Society Score (KSS)
- Antibiotic treatment
- Source of infection (primary focus)
- Microorganisms isolated
- Surgeon who performed the surgery

- Further surgical intervention for tt of infection
- Death before the end of ATB tt
- Life long ATB tt

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RESULTS



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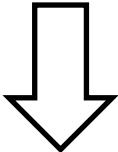


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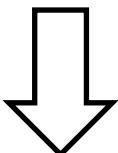
8,5 years follow up

10 acute hematogenous PJI of 2498 TKA

Rate of LAH 0,4%



DAIR performed in all them by knee or PJI surgeon



0% Failure rate



RESULTS



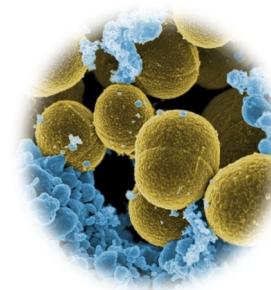
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- 4,7 y (SD 3,6) elapsed time TKA to LAH
- 2,75 d DAIR from the onset of symptoms.
- 3 cases identified source of infection

| Organism | Total (n=10) |
|--|-----------------|
| Staphylococcus aureus | 3 |
| Escherichia coli | 3 |
| Coagulase negative staphylococcus (CNS) | 2 |
| Culture-negative PJI | 2 |



RESULTS

| | Late acute hematogenous (LAH) (n=10) | Control group (n=20) | P value |
|-------------------|--|-------------------------|---------|
| Age (yr.) | 72.60 ± 9.47 | 70.70 ± 9.76 | 0.44 |
| Gender (M/F) (%) | 2/8 (20/80) | 4/16 (20/80) | 1 |
| KSS | 84.1 ± 17.87 | 82.10 ± 10.7 | 0.29 |
| Follow up (years) | 8.5 ± 2.46 | 8.95 ± 2.96 | 0.74 |



DISCUSION

Observational Study > J Infect. 2019 Jan;78(1):40-47. doi: 10.1016/j.jinf.2018.08.007.

Epub 2018 Aug 7.

Clinical outcome and risk factors for failure in late acute prosthetic joint infections treated with debridement and implant retention

Marjan Wouthuyzen-Bakker ¹, Marine Sebillotte ², Jose Lomas ³, Adrian Taylor ³,
Eva Benavent Palomares ⁴, Oscar Murillo ⁴, Javad Parvizi ⁵, Noam Shohat ⁶,

Prosthetic Joint Infection (PJI) ¹

Late acute hematogenous (LAH)

DAIR
Low cure rate (\approx 70%)

Observational Study > Clin Orthop Relat Res. 2020 Jun;478(6):1348-1355.
doi: 10.1097/CORR.0000000000001171.

Lower Success Rate of Débridement and Implant Retention in Late Acute versus Early Acute Periprosthetic Joint Infection Caused by *Staphylococcus* spp. Results from a Matched Cohort Study

Marjan Wouthuyzen-Bakker ¹, Marine Sebillotte ², Kaisa Huotari ³, Rosa Escudero Sánchez ⁴,
Eva Benavent ⁵, Javad Parvizi ⁶, Marta Fernandez-Sampedro ⁷, José María Barbero ⁸,

¹ Zimmerli W, Trampuz A, Ochsner PE. Prosthetic joint infections. N Engl J Med 2004;351(16):1645–1654.



DISCUSION

DAIR
High cure rate (100%)

— Why this disparity? —

DAIR
Low cure rate ($\approx 70\%$)

- Misdiagnose LAH PJI
 - Unrecognized chronic PJI that deteriorated acutely
- DAIR performed by knee and/or PJI surgeon
- 50% staphylococcal species in our study.
 - High cure rate
- Non streptococcal microorganism in our study
 - Lower cure rate



CONCLUSION

DAIR provides a **high cure rate** in LAH PJI with **good functional outcomes** in long term follow up



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