

Almost 79% Survival Rate At 10-Year Follow-Up For The Patellofemoral Joint Arthroplasty: A Registry Study

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Faculty Disclosure Information

- Stefano Zaffagnini is a consultant for Smith and Nephew and DePuy Synthes
- The other authors have nothing to declare

RIPO REGISTRY

PROSTHESIS REGISTRY OF EMILIA ROMAGNA REGION

4.5 MILLION POPULATION, 64 HOSPITALS

IMPLANTS DATA:

- HIP
- KNEE
- SHOULDER

PRIMARY AND REVISION SURGERIES





METHODS

INCLUSION CRITERIA:

PATELLOFEMORAL JOINT REPLACEMENT (PFJ)

PERFORMED BETWEEN 2000 AND 2019 IN THE REGION

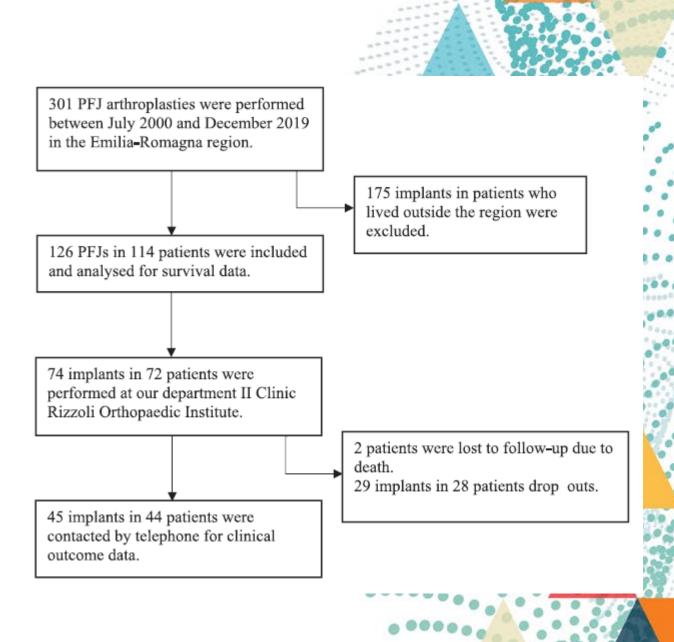
EXCLUSION CRITERIA:

PATIENTS NOT LIVING IN EMILIA ROMAGNA (to reduce the risk of not catching revisions performed in another region)

ENDPOINT: REVISION OF ANY COMPONENT BY DECEMBER 2022 OR PATIENT DEATH DATE

SECONDARY ANALYSIS: PROMs OF PATIENTS WHO UNDERWENT SURGERY AT OUR DEPARTMENT





DEMOGRAPHICS

126 PFJ IN 114 PATIENTS

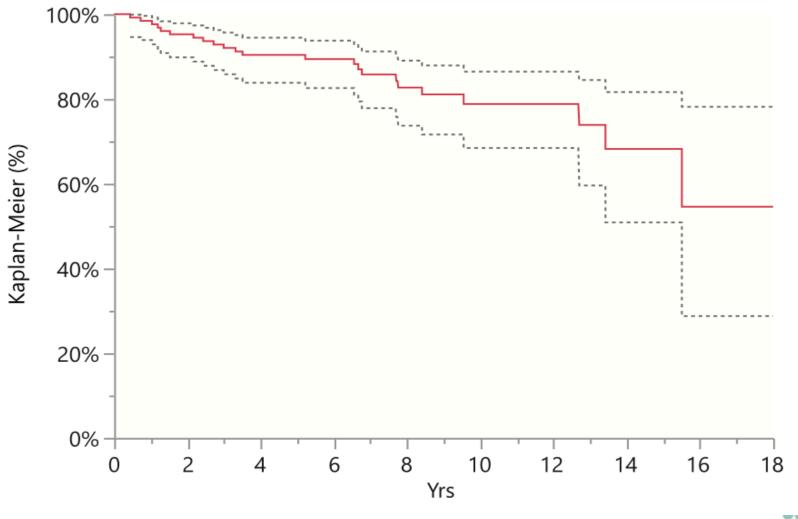
MEAN FOLLOW-UP: 7.7 ± 3.9 YEARS

	n	%
Sex		
Female	89	70.6
Male	37	29.4
Side operated		
Right	66	52.4
Left	60	47.6
Body mass index ^a		
Normalweight	37	32.8
Overweight	46	40.7
Obese	30	26.5

	n	%
Diagnosis		
Primary patellofemoral arthritis	111	88.1
Posttraumatic and sequelae fractures	7	5.6
Deformity	1	0.8
Patello-femoral necrosis	1	0.8
Others	6	4.7
Revision causes		
Osteoarthrosis progression	8	34.8
Pain without loosening	6	26.1
Aseptic loosening	5	21.7
Infection	3	13.0
Others	1	4.3

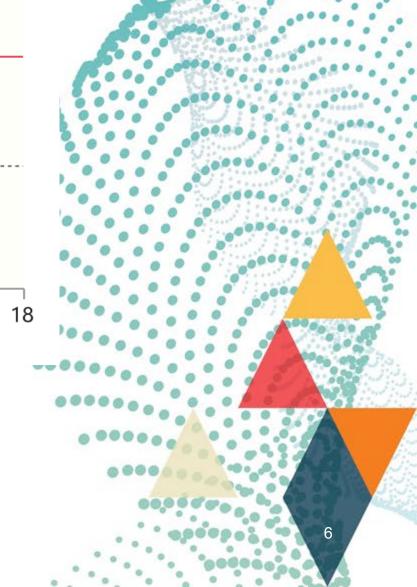


SURVIVORSHIP



Survivorship	5 Years FU	10 Years FU
	$90.4 \pm 30.6\%$	$78.8 \pm 51.5\%$





PROMs (secondary analysis)

SECONDARY ANALYSIS OF PATIENTS OPERATED AT OUR DEPARTMENT

WOMAC	83.5 ± 22.6
KSSf	83.9 ± 24.8
Forgotten Joint Score	88.4 ± 20.3
Oxford Knee Score	39.7 ± 11.0

Mean Follow up	10.3 ± 4.7
	years
No of implants	45
No of patients	44
Age at surgery (years)	53.1
Range	(31-72)
Gender (%)	
Male	25
Female	75
Side operated (%)	
Right	52.3
Left	47.7
BMI (%)	
Overweight	43.2
Obese	11.4



CONCLUSIONS

PFJ SHOWED GOOD SURVIVAL AND CLINICAL OUTCOMES AND CAN BE CONFIDENTLY

PROPOSED TO PATIENTS AFFECTED BY ISOLATED PATELLOFEMORAL OA

OA PROGRESSION IS THE MOST COMMON FAILURE CAUSE

BE AWARE IN YOUNG, ACTIVE, OVERWEIGHT PATIENTS WITH A HISTORY OF ARTHROFIBROSIS AND FAILURE OF PREVIOUS PATELLOFEMORAL SURGERY





