

# Functional Outcomes Following Direct Anterior Approach to Hip Resurfacing Arthroplasty

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# **Faculty Disclosure Information**

Nothing to disclose







#### Introduction

- The Direct Anterior Approach (DAA) for hip arthroplasty is gaining attention for its muscle-sparing potential.
- Surgical technique: Minimally invasive approach via DAA.
   Preservation of key muscle groups and capsular integrity.
   Implantation strategy and post-op rehabilitation protocol
- Challenges: Technical complexity and a steep learning curve
- Research Gap: Limited literature on hip resurfacing with DAA.





# **Objectives**

 Assess feasibility and functional outcomes of hip resurfacing via DAA.

 Compare patient-reported outcomes with total hip arthroplasty (THA) using DAA.







#### **Methods**

- Retrospective analysis of first 8 DAA hip resurfacing cases.
- Primary outcome: Forgotten Joint Score-12\* (FJS-12) & comparison with published DAA THA data.
- Secondary outcomes- Any post-operative complications, length of hospital stay, operative time, and blood loss.

\* Assesses patients' perception of joint awareness





## **Results**

• 8 male patients, median age 58 (IQR: 47–60)

• BMI: 26.9 (SD = 2.8)

• Charlson Comorbidity Index: 1.5 (SD = 0.9)

Median follow-up: 17 months (IQR = 10–20)

Anesthesia: 4 general, 4 spinal

CONGRESS GERMANY

Blood loss: 118 ml (avg)

## **Functional outcomes**

• FJS-12 Score: <u>67.3/100</u> (SE = 14.4).

• Comparable to DAA THA (67.5/100, SE = 1.1).





## **Complications**

- 1 periprosthetic base of neck fracture → Revised to total hip arthroplasty.
- No dislocations or deep infections.
- No implant failures at follow-up.





#### **Discussion**

 <u>Feasibility</u>: DAA hip resurfacing achieves comparable results to DAA THA.

• <u>Advantages</u>: Muscle preservation, lower soft-tissue trauma, similar patient satisfaction.

Challenges: Learning curve and risk of periprosthetic fracture.







## **Conclusions**

• DAA hip resurfacing is a viable option with functional outcomes comparable to DAA THA.

Further research needed for long-term outcomes and implant survivorship.





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