

# OS ACETABULI DO NOT PORTEND INFERIOR 2-YEAR FUNCTIONAL OUTCOMES

## *In Patients Undergoing Arthroscopic Acetabular Labral Repair*

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# DISCLOSURES

- *Research Support provided by:*
- ***The Conine Family Fund for Joint Preservation***
- I (and/or my co-authors) have nothing to disclose directly related to this talk.
- I have no conflicts.





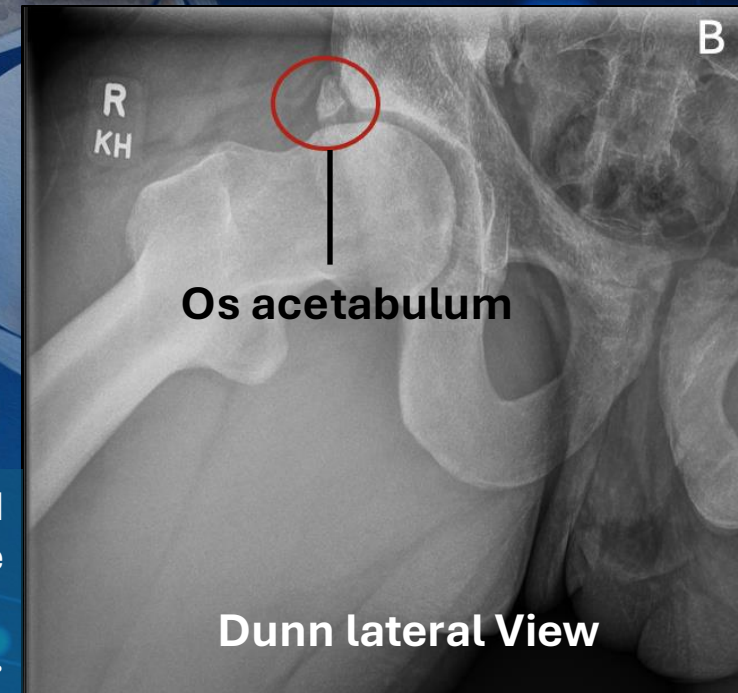
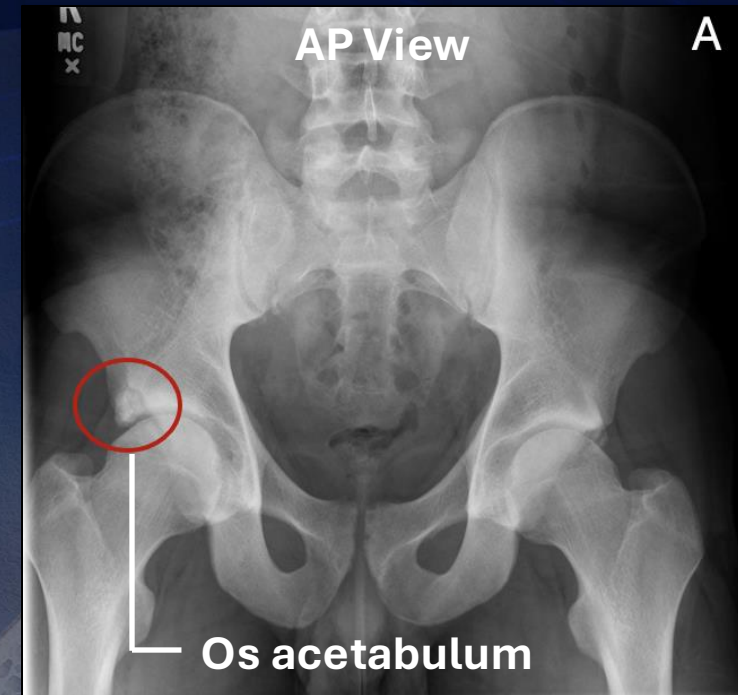
# BACKGROUND

- Hip arthroscopy
  - Identify preoperative risk factors limiting
    - Patient progress
    - Outcomes
- Os acetabuli
  - Fracture of anterolateral aspect of the acetabular rim

# STUDY AIM

- To investigate association between
  - Preoperatively identified os acetabuli
  - 2-year functional outcomes
    - Following hip arthroscopy

Figure 1. A) Large os acetabulum (right) compared to the healthy contralateral side  
B) Os acetabulum measuring 1.57 cm in width and 1.89 cm in width.



# METHODS

- Retrospective review, prospectively-collected data
  - Patients  $\geq 18$  years
  - Underwent primary hip arthroscopy by a single surgeon
    - Treatment of symptomatic labral tears
      - 2° to femoroacetabular impingement (FAI)
- Presence or absence of os acetabuli
  - Used to stratify patients into cohorts
    - Present (Os Acetabuli)
    - Absent (No os acetabuli)
- Patient-reported outcome measures (PROM)
  - Collected at:
    - Baseline
    - 3 months
    - 6 months
    - 1 year

**Table 1. Patient Demographics and radiographic findings**

\*Data are reported as mean (SD) or No. of patients (%). Boldface denotes statistical significance ( $p < 0.05$ ). Abbreviations: BMI, body mass index; LCEA, lateral center-edge angle; FAI, femoroacetabular impingement

	Os acetabuli (n=25)	No os acetabuli (n=168)	P value
Age	33.5 (9.6)	36.3 (11.4)	0.235
BMI (kg/m <sup>2</sup> )	25.6 (4.2)	25.2 (3.9)	0.68
Sex			0.393
Female	10 (40.0)	85 (50.6)	
Male	15 (60.0)	83 (49.4)	
Race			>0.99
Asian	0 (0.0)	4 (2.4)	
Black or African American	0 (0.0)	2 (1.2)	
White	25 (100.0)	156 (92.9)	
Other or not reported	0 (0.0)	6 (3.6)	
Ethnicity			>0.99
Hispanic or Latino	1 (4.0)	8 (4.8)	
Not Hispanic or Latino	21 (84.0)	137 (81.5)	
Unknown or Not Reported	3 (12.0)	23 (13.7)	
Laterality			0.52
Left	13 (52.0)	73 (43.5)	
Right	12 (48.0)	95 (56.5)	
Tönnis classification			0.68
Grade 0	11 (44.0)	82 (48.8)	
Grade 1	14 (56.0)	86 (51.2)	
Tönnis angle	1.9 (6.2)	3.22 (7.1)	0.38
LCEa	36.4 (6.6)	35.3 (6.8)	0.48
Alpha angle	49.9 (14.5)	49.2 (14.4)	0.821
Type of FAI			0.50
Isolated cam	0 (0.0)	2 (1.2)	
Isolated pincer	10 (40.0)	87 (51.8)	
Both	15 (60.0)	73 (43.5)	
Neither	0 (0.0)	6 (3.6)	
<b>Coxa profunda</b>	<b>6 (24.0)</b>	<b>84 (50.0)</b>	<b>0.018</b>
Protrusio acetabuli	0 (0.0)	3 (1.8)	>0.99
Labral calcification	2 (8.0)	2 (1.2)	0.08



# RESULTS

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- 193 patients met inclusion criteria
  - 25 with os acetabuli
  - 168 without os acetabuli
- Similar patient-reported outcome measures (PROM)
  - At baseline
  - At all timepoints
- No significant differences between groups
  - For all PROM scales

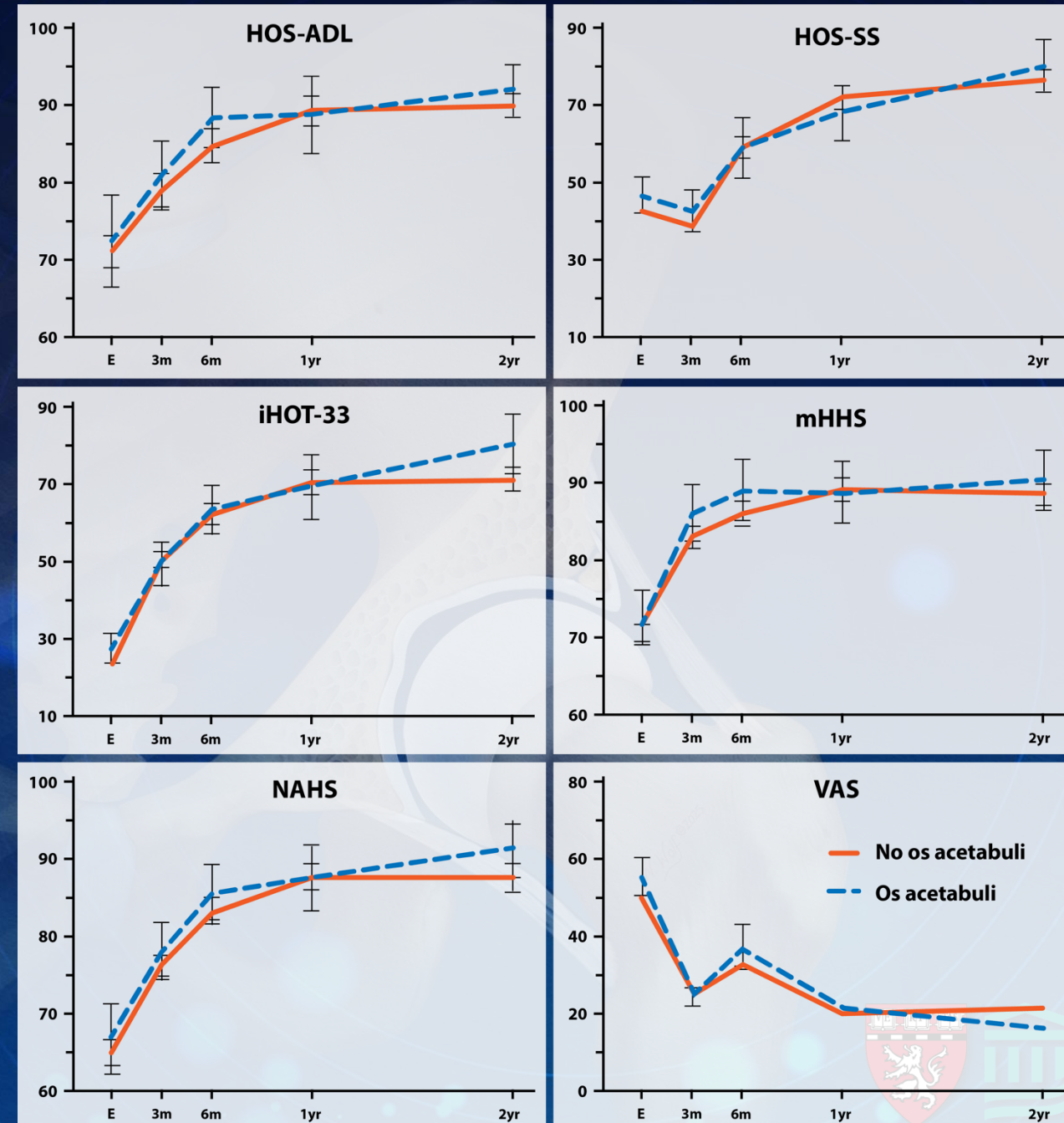


Figure 2. Patient-reported outcomes over time for patients with versus without ossa acetabuli.

# RESULTS

- MCID achievement
  - **Similar between groups at 2 years**

Table 2. Percent of patients achieving MCID, PASS, and SCB threshold scores

PROM	MCID			PASS			SCB		
	OA	No OA	P value	OA	No OA	P value	OA	No OA	P value
<b>1 year</b>	<b>23</b>	<b>156</b>		<b>23</b>	<b>156</b>		<b>23</b>	<b>156</b>	
HOS-ADL	65.2	66.7	>0.99	60.9	64.7	0.82	60.9	64.7	0.82
HOS-SS	69.6	73.9	0.62	47.8	57.5	0.50	39.1	48.4	0.50
iHOT-33	78.3	74.4	0.80	69.6	62.8	0.65	60.9	55.8	0.82
mHHS	69.6	81.7	0.17	52.2	51.0	>0.99	52.2	51.0	>0.99
NAHS	82.6	72.5	0.45	82.6	75.8	0.60	30.4	43.1	0.27
<b>2 year</b>	<b>25</b>	<b>164</b>		<b>25</b>	<b>164</b>		<b>25</b>	<b>164</b>	
HOS-ADL	64.0	64.0	>0.99	68.0	68.9	>0.99	68.0	58.5	0.51
HOS-SS	64.0	75.6	0.23	68.0	62.8	0.66	68.0	62.8	0.66
iHOT-33	92.0	81.1	0.26	80.0	61.0	0.08	72.0	56.1	0.19
mHHS	80.0	81.7	0.79	80.0	68.3	0.35	64.0	51.2	0.29
NAHS	84.0	79.9	0.79	80.0	69.5	0.35	52.0	34.1	0.12

MCID, minimal clinically important difference; PASS, patient acceptable symptomatic state; SCB, substantial clinical benefit; PROM, patient-reported outcome measure; NOA, no os acetabuli; OA, os acetabuli; HOS-ADL, Hip Outcome Score-Activities of Daily Living; HOS-SS, Hip Outcome Score-Sports Specific Subscale; iHOT-33, International Hip Outcome Tool-33; mHHS, modified Harris Hip Score; NAHS, Non-Arthritic Hip Score; VAS visual analogue scale for pain.





# CONCLUSIONS

- Os acetabuli not found to be associated with
  - *2-year functional outcomes*
  - *Achieving clinically meaningful outcomes*
- Os acetabuli will not affect hip arthroscopy outcomes



# THANK YOU

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