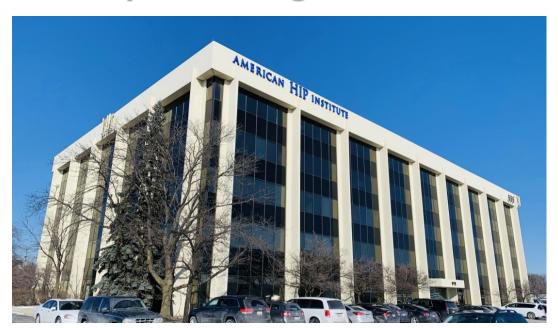
# Labral Hip Reconstruction in Adolescents and Young Adults Yields Positive Functional Outcomes a 5-Year Follow-Up but May Pose a Higher Risk for Revision Hip Arthroscopy





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#### **Disclosures**

I (and/or my co-authors) have something to disclose.

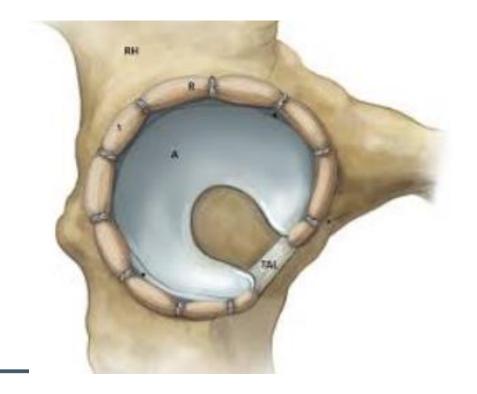
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#### Introduction

 For irreparable labral tears, labral reconstruction has demonstrated favorable midand long-term outcomes in adult populations for both primary and revision surgeries.



## Introduction

- Adolescents and Young Adults are often physically active, higher expectations, and seek long-lasting results
- There are short term case reports showing favorable outcomes of labral reconstruction in this population, but long-term outcomes remain to be determined.



# **Purpose**

 To report minimum 5-year outcomes of adolescents and young adults undergoing hip arthroscopy with labral reconstruction with a secondary comparison of these results to a control group of adolescents and young adults undergoing labral repair.



# **Methods**

- Exclusion Criteria:
  - Unwillingness
  - Worker's compensations claims
  - Dysplasia (LCEA < 18)</li>
  - Tonnis osteoarthritis grade > 1
  - Inflammatory joint disease
- 1:1 propensity match
  - Age at surgery
  - o Sex
  - o BMI
  - Type of surgery (primary or revision hip arthroscopy)
  - Capsular treatment
  - Preoperative Tonnis grade

Table 1. Demographics

	Control (Repair)	Reconstruction	P Valu
Eligible hip arthroscopy with follow-up*	419	28	<u>-</u>
Matched Cases*	24	24	-
Primary	10	10	
Revisions	14	14	
Sex <sup>†</sup>			
Male	11 (45.8%)	11 (45.8%)	1
Female	13 (54.2%)	13 (54.2%)	1
Age at Surgery (yr)‡	19.43 ± 1.88	19.35 ± 2.10	0.85
BMI (kg/m²)‡	24.01 ± 2.62	$25.49 \pm 3.78$	0.13
Follow-up time (mo) ‡	$88.94 \pm 32.18$	$74.46 \pm 31.82$	0.26
Beighton	$3.75 \pm 3.30$	$3.25 \pm 3.28$	1

\*The values are given as the number of cases



<sup>†</sup>The values are given as the number of patients, with the percentage in parentheses.

<sup>&</sup>lt;sup>‡</sup>The values are given as mean and the standard deviation, with the range in parentheses.

#### **Results**

 Similar magnitudes of improvement between both groups and comparable postoperative scores for all evaluated patient reported outcomes as shown in Table 4 (p > 0.05) Table 4. Patient-Reported Outcomes

	Table 4. Fatient-Reported Outcomes				
	Control (Repair) (n =24)	Reconstruction (n = 24)	P Value		
mHHS					
Preoperative	56.08±16.27	60.09±18.35	0.38		
Postoperative 5-y	83.14±22.49	82.75±19.78	0.93		
Pre vs Post 5-y ∆	28.32±21.53	21.12±24.73	0.32		
Pre vs post 5-y P value	< 0.01	< 0.01			
NAHS					
Preoperative	62.85±18.36	57.87±16.58	0.37		
Postoperative 5-y	85.11±14.99	82.19±21.15	0.69		
Pre vs Post 5-y Δ	23.53±20.21	23.19±24.25	0.96		
Pre vs post P value	< 0.01	< 0.01			
HOS-SSS					
Preoperative	41.73±23.66	36.95±24.71	0.51		
Postoperative 5-y	72.57±27.58	76.64±27.59	0.45		
Pre vs Post 5-y ∆	32.18±33.25	36.55±37.91	0.71		
Pre vs post P value	< 0.01	< 0.01			
VAS		2 8 8 8 8			
Preoperative	5.15±2.40	6.12±2.40	0.2		
Postoperative 5-y	2.04±1.78	2.79±2.92	0.33		
Pre vs Post 5-y Δ	-3.31±2.58	-3.19±3.27	0.9		
Pre vs post P value	< 0.01	< 0.01			
Satisfaction 5-y	8.00±1.85	7.20±2.67	0.32		

\*The values are given as the mean and the standard deviation in points.

mHHS – Modified Harris Hip Score, NAHS – Non-Arthritic Hip Score, HOS-SSS – Hip Outcome Score Sport-Specific Subscale, VAS – Visual Analog Scale.



#### **Revisions**

• Two patients (8.33%) in the labral reconstruction group underwent revision arthroscopy. In the repair group, one patient (4.2%) required revision hip arthroscopy

#### **Conclusions**

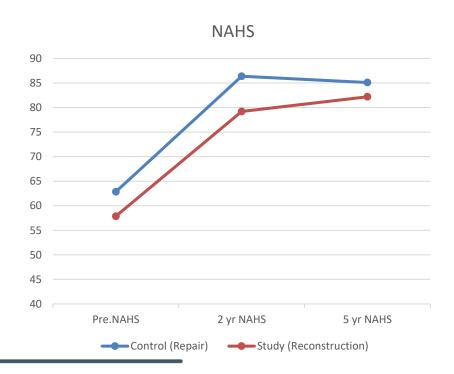
- Patients in reconstruction group reported 95% survivorship free of THA at a minimum 5-year follow-up.
- Reconstruction group achieved similar postoperative PRO scores to control group who underwent labral repairs.





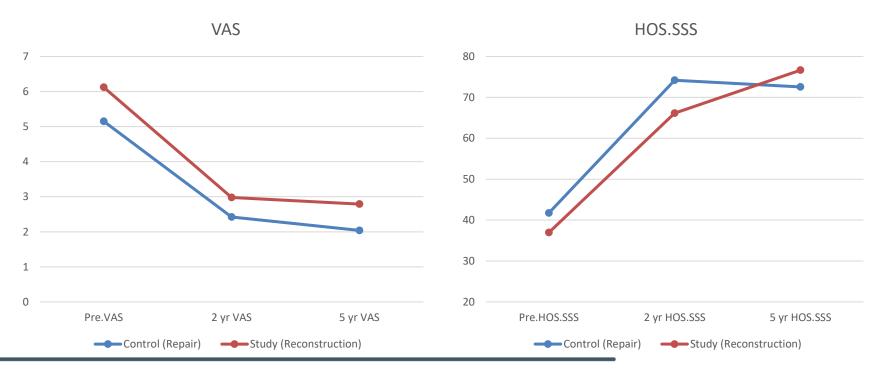
#### **Conclusions**

 Figures demonstrating durability for each labral treatment.





## **Conclusions**





#### References

- Domb BG, El Bitar YF, Stake CE, Trenga AP, Jackson TJ, Lindner D. Arthroscopic Labral Reconstruction Is Superior to Segmental Resection for Irreparable Labral Tears in the Hip: A Matched-Pair Controlled Study With Minimum 2-Year Follow-up. *Am J Sports Med.* 2014;42(1):122-130. doi:10.1177/0363546513508256
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