

Danish Hip Arthroscopy Registry: Capsular Closing in Patients with Femoroacetabular Impingement (FAI). Results of a Matched-Cohort Controlled Study

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Summary:

Capsular closure during hip arthroscopy might positively influence subjective outcome.

Abstract:

Background:

Capsular closure in FAI patients during hip arthroscopy procedures are still debated. The Danish Hip Arthroscopy Registry (DHAR) contains data to perform matched-cohort analyses.

Purpose/aim of study:

The purpose of this study was to describe data from DHAR after FAI surgery associated with capsular closure, report outcome data and compare these outcome data with a matched-cohort study group. Our primary hypothesis was that patients undergoing hip arthroscopy would not benefit in subjective outcome from capsular closure compared with no closure.

Materials and methods:

We identified FAI patients in DHAR where the capsule was closed during the hip arthroscopy. A matched cohort of patients who did not have capsular closure performed were selected. Matching criteria were age, gender, radiological parameters (lateral centre edge angle and alpha angle). Statistical analyses comparing these two groups regarding changes in patient the following outcome scores; HAGOS, HSAS, EQ-5D and VAS at one and two year follow-up were performed. There were no significant difference in PROM preoperatively between the two groups except for two HAGOS sub scales. A total of 247 hips were identified and included in the group with capsular closure and 247 hips in the matched control group. (PA: Participation in physical activity and QoL: Quality of life).

Findings/results:

Both groups improved significantly in all postoperative PROMs at one and two year follow-up. When comparing the improvements between the two groups we found a significant better improvement in the capsular closure group in VAS and all HAGOS sub scales at both one and two year follow-up. HSAS demonstrated improvement in the closure group at one year but no difference at two year follow-up. EQ-5D showed difference at two year follow-up.

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Conclusions:

This study showed that FAI-patients undergoing capsular closure during hip arthroscopy had a significant improvement in outcome when compared to a matched control group at two years follow-up. We also found improvement in physical activity and quality of life scores. We therefore conclude that capsular closure might positively affect the outcome in FAI-patients during hip arthroscopy.