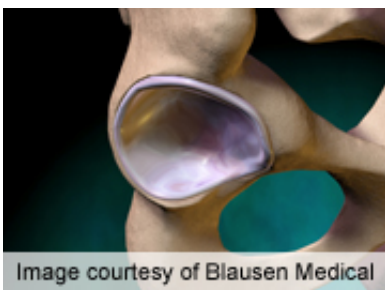


# Hip replacement outcomes similar with/without cement

April 24 2012

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(HealthDay) -- Hemiarthroplasty with the cemented Exeter implant provides pain relief comparable to hemiarthroplasty with the uncemented Alloclassic implant in elderly patients with a displaced femoral neck fracture, according to a study published in the April 4 issue of *The Journal of Bone & Joint Surgery*.

Fraser Taylor, M.B.Ch.B., of Auckland City Hospital in New Zealand, and colleagues studied 160 [elderly patients](#) (mean age, 85 years) who presented with an acute displaced femoral neck fracture. Patients were randomized to hemiarthroplasty with either a cemented Exeter or an uncemented Zweymüller Alloclassic component. Patients were assessed clinically and radiographically over two years.

The researchers observed no significant difference in the at-rest mean

visual analog pain score between the groups. The uncemented group experienced a greater total number of complications (63 versus 28 in the cemented group), significantly more subsidence (18 versus one in the cemented group), and more intraoperative or postoperative fracture (18 versus one in the cemented group). The groups did not differ significantly in mortality rate at any time point (35 deaths in the uncemented group versus 32 in the cemented group at two years), but the Oxford hip score was significantly poorer in the uncemented group at six weeks (38.8 compared with 35.7 in the cemented group). There was poorer mobility and greater dependence on walking aids in the uncemented group but the difference between the groups was not significant.

"In elderly patients (70 years or older) without severe cardiopulmonary compromise who were treated with hemiarthroplasty for a displaced femoral neck fracture, use of a cemented Exeter implant and use of an uncemented Alloclassic [implant](#) provided a comparable outcome with regard to pain," the authors write.

**More information:** [Abstract](#)  
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Citation: Hip replacement outcomes similar with/without cement (2012, April 24) retrieved 9 May 2024 from <https://medicalxpress.com/news/2012-04-hip-outcomes-similar-withwithout-cement.html>

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