

## Hip surgery complication rate higher than previously reported

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Outcomes after surgery have always been difficult to determine. Now a new case study on more than 500 hip procedures highlights that complication rates may be even higher than previous reports, say researchers presenting at the American Orthopaedic Society for Sports Medicine's Specialty Day in Chicago, IL.

"The overall complication rate after hip arthroscopy was 7.2 percent, which is higher than what has been previously reported in the literature at 1.5 percent," said lead author Christopher Larson, MD of the Minnesota Orthopaedic Sports Medicine Institute in Minneapolis. "Our multicenter study trial is one of the first to evaluate complication rates for all arthroscopic hip procedures using a grading scheme that evaluated the possibility of complications based on demographic and surgical data. Previous reports on complications were prior to new surgical techniques such as labral repair and treatment of femoroacetabular impingement (FAI) or were not comprehensive."

Between January 2011 and April 2012, Larson and his team, evaluated 573 individuals (287 males, 286 females) with a mean age of 32.3 years who underwent hip arthroscopy (minimally invasive surgical procedure in which an examination and sometimes treatment of damage of the interior of a joint is performed using an arthroscope) at three institutions. The diagnosis, demographic information and procedures were recorded, and a validated complications grading classification was used for all patients prospectively.



"The most common adverse event after surgery (22.7% of hips) was post-operative sensory disturbance in the leg and only persisted beyond six months in four hips and was considered a sequelae rather than a complication. There was no difference in complications between males vs. females, primary vs. revision, labral repair vs. debridement and <a href="BMI">BMI</a>," said Larson. "We hope that our research helps to provide new insights into surgery complications and how to prevent them."

## Provided by American Orthopaedic Society for Sports Medicine

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