

Screening strategy doesn't affect hip dysplasia outcomes

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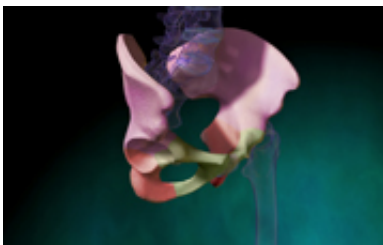


Image courtesy of Blausen Medical

Degenerative changes with hip dysplasia are similar in long-term maturity follow-up regardless of ultrasound screening approach, according to a study published online Aug. 19 in *Pediatrics*.

(HealthDay)—Degenerative changes with hip dysplasia are similar in long-term maturity follow-up regardless of ultrasound screening approach, according to a study published online Aug. 19 in *Pediatrics*.

Lene B. Laborie, M.D., from the University of Bergen in Norway, and colleagues analyzed data from a sample of 3,935 [adolescents](#) aged 18 to 20 years invited for follow-up from an earlier trial including 11,925 [newborns](#). An anteroposterior, standardized weight-bearing view was obtained with ultrasound, and dysplasia (center-edge angle, femoral head extrusion-index, acetabular depth-width ratio, Sharp's angle, subjective evaluation of dysplasia) and degenerative change (joint-space width) were evaluated.

The researchers found that, of the 2,011 subjects participating in the maturity review, 551 were from the universal [newborn screening](#) group, 665 from the selective newborn screening group, and 795 from the clinical newborn screening group in the original study. Depending on the radiographic marker used, there was variance in the rates per group by which positive radiographic findings were associated with dysplasia or degenerative change, but differences were not statistically significant.

"Although both selective and universal ultrasound screenings gave a non-significant reduction in rates of late cases when compared with expert clinical programs, we were unable to demonstrate any additional reduction in the rates of radiographic findings associated with acetabular dysplasia or degenerative change at maturity," the authors write.

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