

## TOTAL HIP REPLACEMENT IN ADULT DYSPLASTIC HIP. A CASE REPORT.

She Ann Lee<sup>1,2</sup>, Khairul Anwar Ayob<sup>1</sup>, Azlina Amir Abbas<sup>1</sup>, Azhar Mahmood Merican<sup>1</sup>

<sup>1</sup>University of Malaya, <sup>2</sup>Hospital Ampang

**Introduction:** Developmental dysplastic hip (DDH) is one of the leading causes of hip arthritis in young adults. Surgically, it can be treated in early childhood with periacetabular or femoral osteotomy. Operative treatment is more challenging later in adult life.

**Discussion:** We present a case of a 48 years old woman with bilateral adult hip dysplasia, Crowe Type II and Hartofilakidis Type B with arthritic changes. She presented to us with symptoms of pain over both hips and abnormal gait since childhood, which were both progressively worsening. Bilateral total hip arthroplasty with modular femoral stem and ceramic on ceramic bearings were performed a year apart. Post operation, patient has been ambulating well without limb length discrepancy or other complication. Aim of acetabular reconstruction for DDH is to achieve normal anatomical properties of the hip with normal hip center of rotation and to obtain sufficient coverage of the acetabular cup. Different surgeries are advocated based on severity of DDH. For this patient, medialization of cup was done by intentional over-reaming and deliberate fracture of acetabular medial wall. This increased acetabular lateral coverage by native iliac bone and decreases joint reactive forces through medialization of hip center of rotation.

**Conclusion:** Total hip arthroplasty in patients with DDH is a complex procedure that requires an understanding of the complex acetabular and proximal femoral anatomy of each patient. The complex anatomy dictates what surgical techniques are necessary to create a mechanically stable and functional outcome.