

TOTAL HIP REPLACEMENT IN DEVELOPMENTAL DYSPLASIA OF THE HIP: A CHAPTER OF QUARTER CENTURY

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Introduction: Developmental dysplasia of the hip (DDH) describes a spectrum of disorders that results in abnormal development of the hip joint. Delayed presentation with secondary hip osteoarthritis and pain affecting daily activities prevalent among young adults. Altered anatomy in DDH and the presenting young age imposes a challenge to treating surgeon to achieve stable and functional hip joint with long term survival.

Discussion: 68-year-old Indian lady with underlying bilateral developmental dysplasia of the hip (DDH). She was initially referred to our centre at the age of 41 years old, with presenting complaint of mechanical hip pain. General range of movement were limited. Her preoperative pelvis radiograph showed bilateral hypoplastic acetabulum with Crowe Classification Grade IV. Patient subsequently underwent a left total hip reconstruction on 20th December 1994. She was then on yearly follow up at our centre and had been ambulating well without limitation in activities of daily living. Harris hip score was 88%.

Conclusion: Asian and western literature concerning survival rate of THA in DDH demonstrates approximately 15 years follow up. To the best of our knowledge, this is the longest follow up for DDH in our centre and country. Uncemented implant has proven track record in implant survival. Usage of uncemented THA augmented with femoral autograft offers a way to ensure anatomic placement of socket and high rate of graft incorporation. Choice of bearing surface was metal on poly. The ideal bearing surface is not known, although the longest data available support the use of metal-on-polyethylene. Proper pre operative planning and meticulous surgical technique helps in long term survival of an implant in DDH.