SAME SITIING BILATERAL HIP REPLACEMENT ADVANCES AND DISADVANTAGES IN ASIAN POPULATIONS.

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INTRODUCTION-A population especially in Indian subcontinent the habit of squatting for the various social and day today activities makes it more pertinent to operate bilateral AVN hips at same sitting as this not only helps economically in using the same surgical kit and antibiotics and drapes etc. reducing the cost of surgery and also helps in post-operative management.

Patient becomes mobile with both the hip painless and active.

Review of literature-

Total joint replacements represent a considerable part of day-to-day orthopaedic routine and a substantial proportion of patients undergoing unilateral total hip arthroplasty require a contralateral treatment after the first operation. This report compares complications and functional outcome of simultaneous versus early and delayed two-stage bilateral THA over a five-year follow-up period.

Total joint replacements represent a large part of day-to-day orthopaedic routine. For the aging population, total hip arthroplasty (THA) has become a key treatment for re-establishing independence and quality of life. A substantial proportion of patients undergoing unilateral total hip arthroplasty require a contralateral treatment thereafter [1, 2, 3]. Since Ritter and Randolph (1976) performed the first detailed study of the functional outcome of simultaneous bilateral THA, there has been an ongoing discussion regarding benefits and disadvantages of one-stage versus two-stage procedures [4]. A number of articles report advantages of simultaneous operations, or at least similar results of one-stage versus two-stage procedures [1, 2, 5, 6, 7, 8, 9, 10, 11, 12]. The largest

sample described consisted of 461 patients with a mean follow-up time of 3 years, although functional outcome was not assessed [10].

In 1965 M.E. Müller started a systematic collection of THA outcome data and developed a documentation system that culminated in IDES, the International Documentation and Evaluation System for total hip and knee arthroplasty. IDES and precursors have collected prospective information about 48,000 primary THA, 12,000 revision THA, and 77,000 follow-ups from 65 hospitals in Europe. The richness of information in the database makes possible comparison of different timings of bilateral THA.

In the current study we compared simultaneous bilateral THA (Group I) with early (within six months) (Group II) and delayed (within five years) two-stage bilateral THA (Group III) regarding complications and functional outcome over a five-year follow-up period. The two surgeries in the delayed two-stage group were separately analyzed. A large cohort of Charnley class A patients with unilateral THA were used as reference group for graphical comparisons.

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Material and Method -The study is a post hoc analysis of prospectively collected data is from the department of orthopaedics from a single surgeon. Total number of cases was 21,all were between the age group of 36-68 (avg. 52), operated by the posterior approach ,implant used was same in all (stryker). Our study is based on the IDES (International Documentation and Evaluation System) hip registry of the Institute for Evaluative Research in Orthopaedic Surgery at the University of Bern. The history and administration of the registry have been previously described [13, 14]. Table 1 shows the variables used for the analysis.

Table 1

International Documentation and Evaluation System variables used for the study.

Variable	**Answer options**
Date of birth	
Date of surgery	
Gender	male
	female
Operation side	right
	left

Variable	Answer options
Diagnosis	osteoarthritis
	developmental displasia
	inflammatory arthritis
	fracture
	miscellaneous
Pain	none
	mild
	moderate
	severe
	intolerable
Walking capacity restriction	>60 min
	31 min to 60 min
	10 min to 30 min
	<10 min
	impossible
Flexion	>90°
	71° to 90°
	30° to 70°
	<30°
	stiff

Variable	Answer options
Harris Hip Score	
Intraoperative complications	none
	perforation
	proximal fracture
	distal fracture
	fracture of trochanter
	tendency to dislocate
	vascular
	pelvic perforation
	other
Systemic postoperative complication	none
	deep thrombosis
	pulmonary embolism
	cardiovascular
	respiratory
	gastrointestinal
	urological
	CNS
	other
Local postoperative complication	none

Variable	Answer options
	hematoma
	dislocation
	neuropraxia
	wound dehiscence
	superficial
	deep infection
	sinus
	other
Follow-up date	

RESULTS -Total duration of surgery being 2.5 hours, post-operative period was non-significant all responded well, only there was one CPN, WHICH WAS GIVEN BRACE SUPPORT.

CONCLUSION –

Simultaneous bilateral total hip arthroplasty in India subjects seams very useful and helps economically also as this saves lot of money, time of surgeon and operation theatres time.

It should be broadly recommended.

Key words: bilateral AVN, hip replacement, simultaneous

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