

Congenital Hip Disease

G. Hartofilakidis

Terminology

Congenital Dislocation (CDH)

Developmental Dysplasia (DDH)

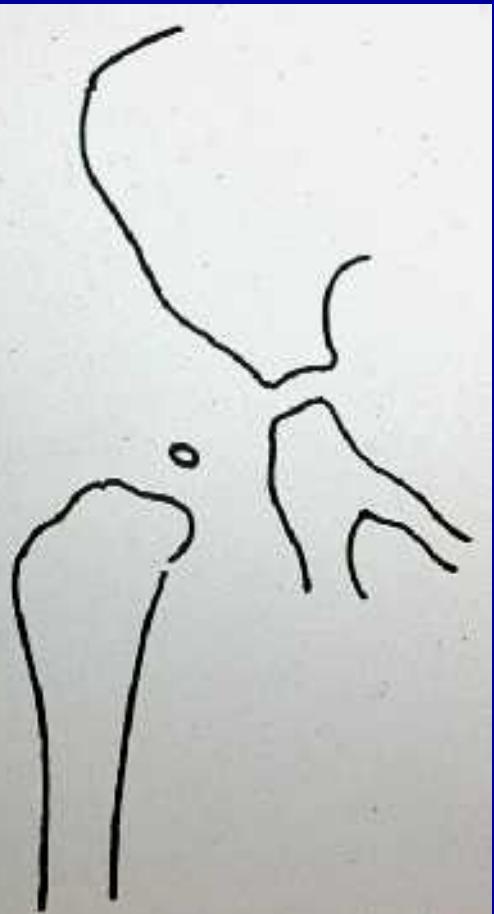
Congenital Hip Disease (CHD)

Congenital Hip Disease

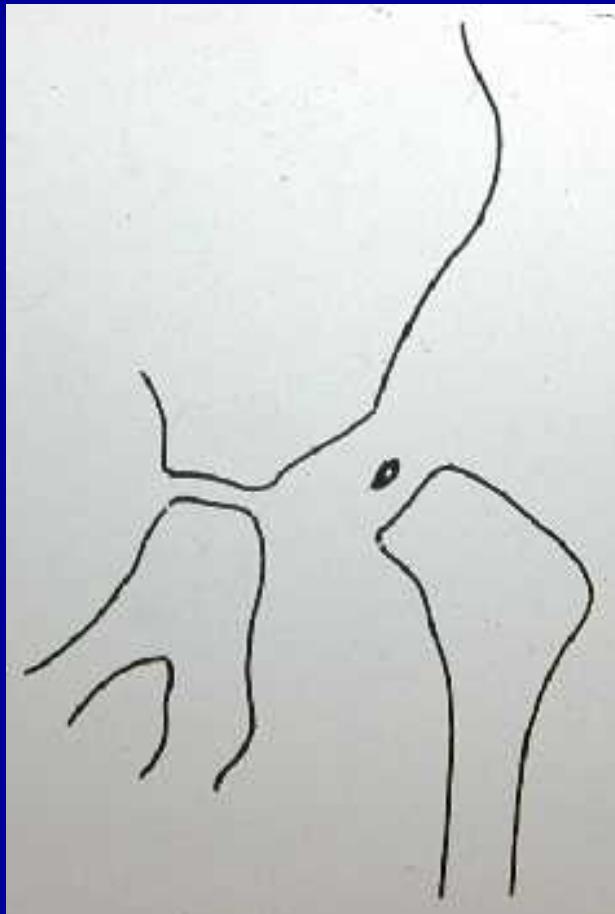
- Stanisavligenic and Mitelel JBJS-Am 1963
- Arnold et al JBJS-Am 1964
- Robin et al Am.J. Publ. Health 1965
- Harris and Stulberg JBJS-Am 1973
- Wedge and Wasyleenko Clin Orth. 1978
- Walker JBJS-Am. 1980
- Thomas et al JBJS-Am 1982
- Hartofilakidis et al JBJS-Am 1996

CHD in the infant

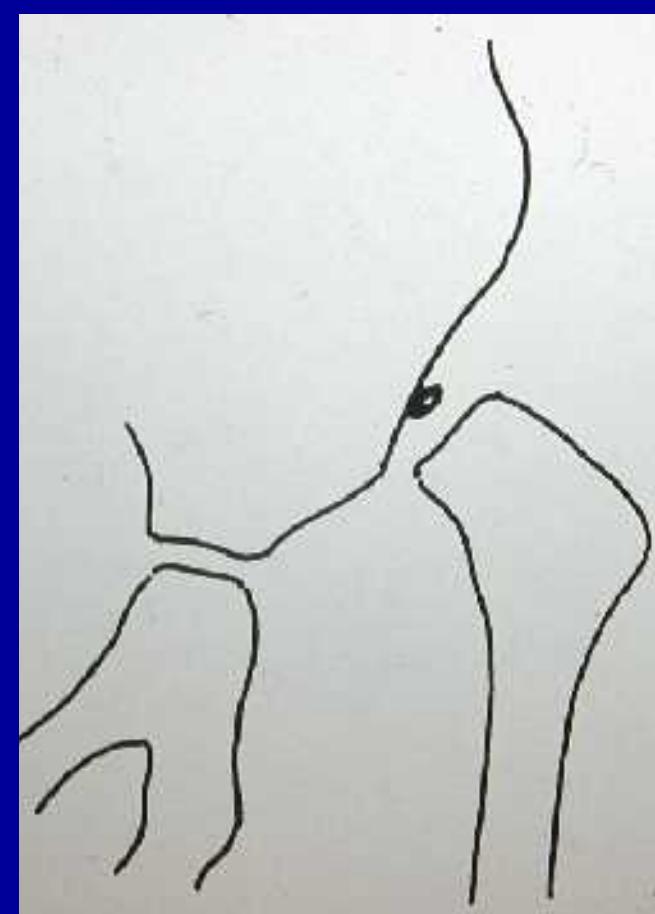
Dysplasia



Subluxation



Dislocation





Dysplasia



Subluxation



Dislocation

Classification of Congenital Hip Disease in Adults

- Better communication
- Planing of treatment
- Evaluation of results

Hartofilakidis et al Classification

- Dysplasia
- Low dislocation
- High dislocation

Eftecar 1978

Crowe et al 1979

Hartofilakidis et al 1988

The system of Hartofilakidis et al classification of CHD

- JBJS 70-B, 1988
- JBJS 78-A, 1996
- JBJS 80-A, 1998
- Orthopaedics 23, 2000
- Surgical Techniques in Orthopaedics and Traumatology, 2000
- JBJS 86-A, 2004

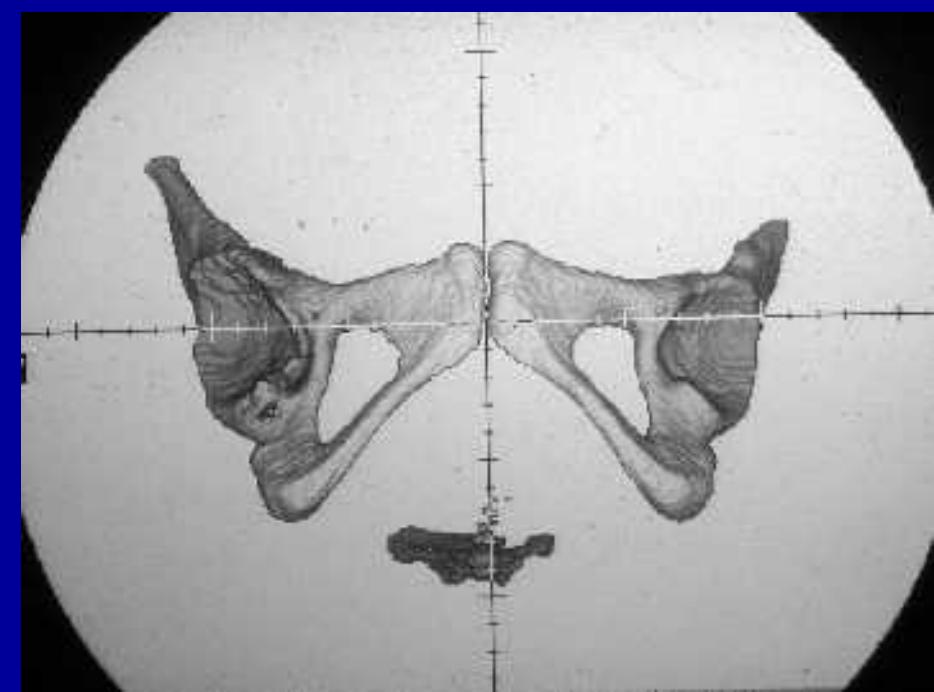
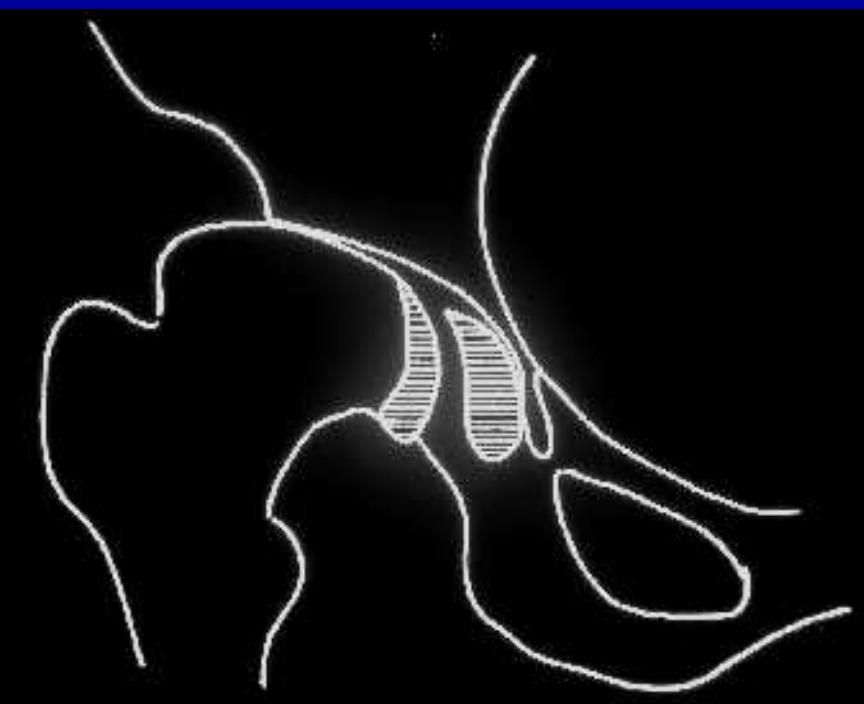
Congenital Hip Disease

(n. 356)

Type	N. of Hips
Dysplasia	170 (47,7%)
Low Disloc	85 (23,9%)
High Disloc	101 (28,4%)

Type A Dysplasia

The femoral head is contained within the original acetabulum



Dysplasia



Onset of Symptoms

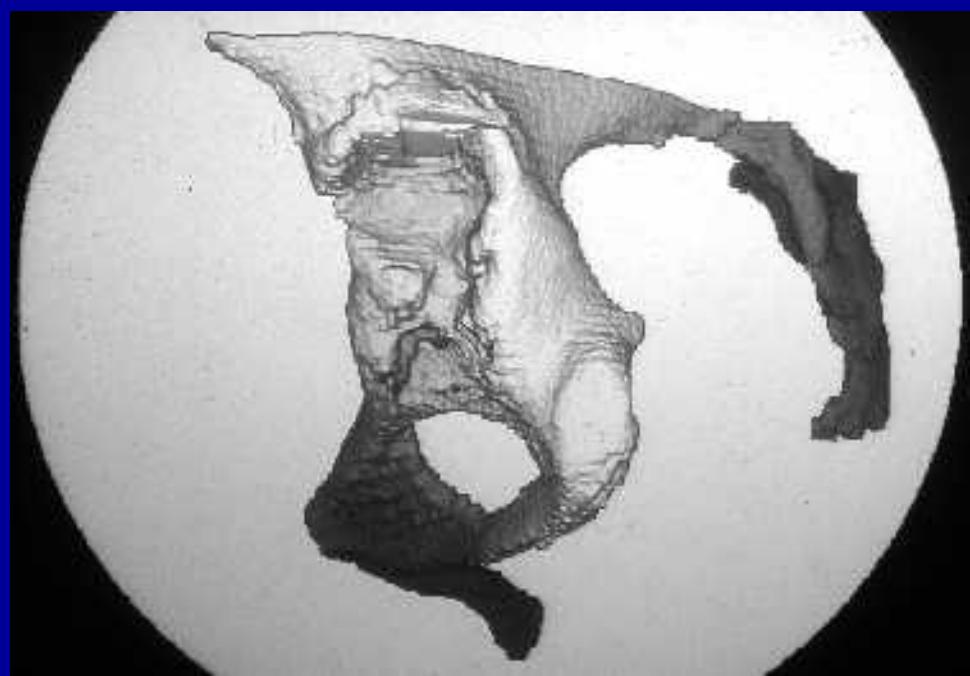
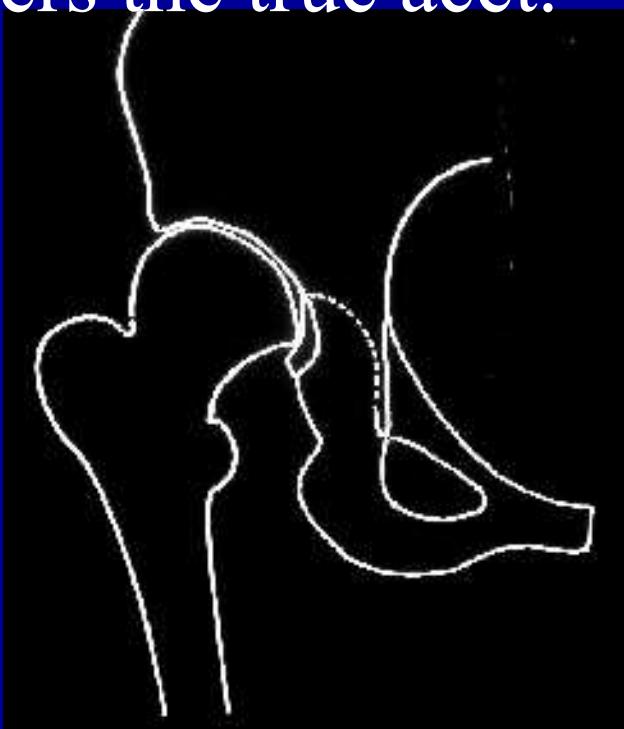
Average age 34y

(range 18-48)



Type B Low dislocation

The femoral head articulates with a false acetabulum that partially covers the true acet.



Low dislocation

Onset of symptoms
(pain)

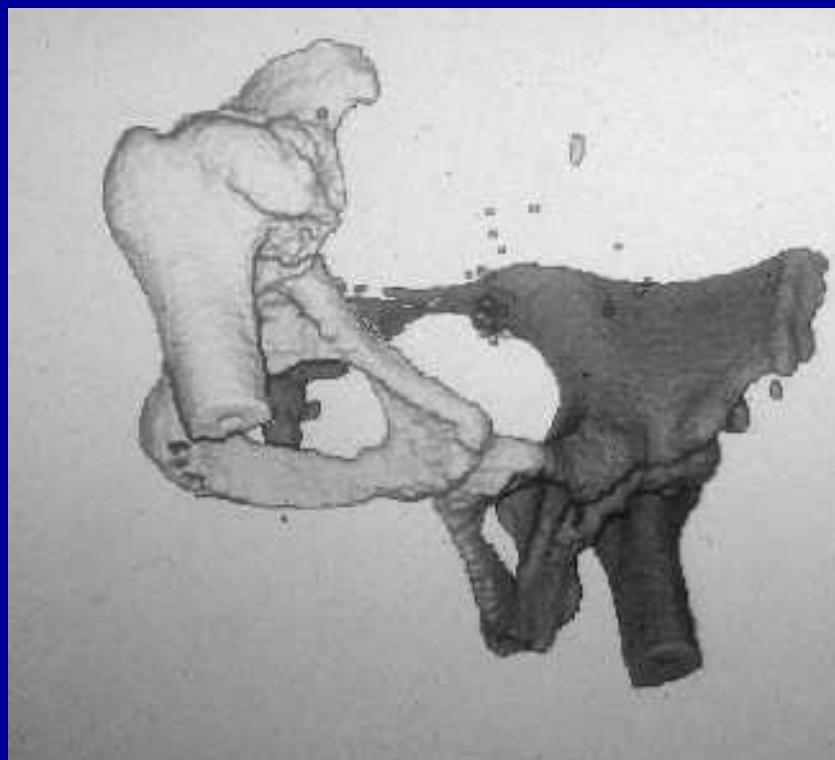
Average age 33y
(range 17-50)

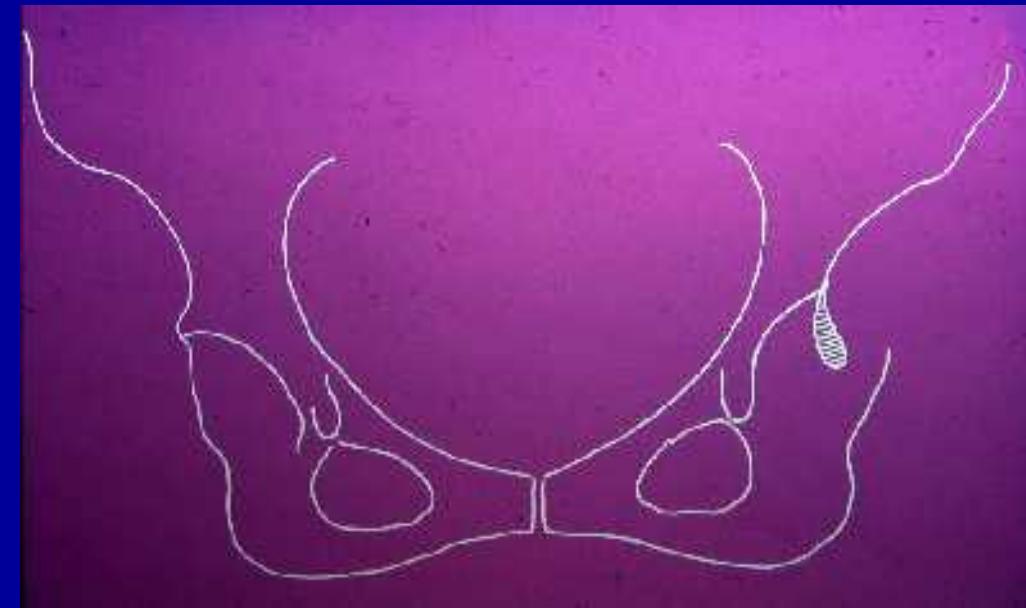
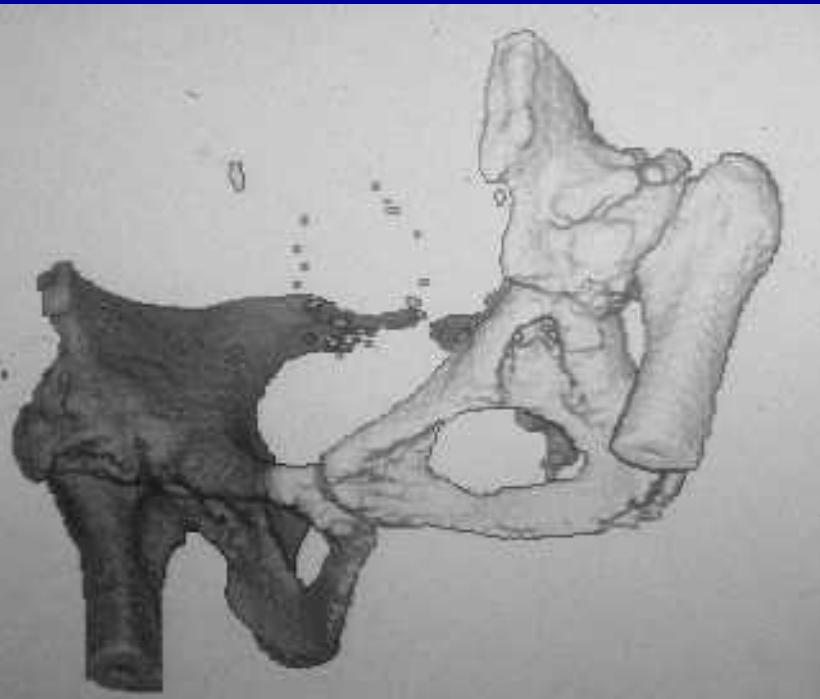


Type C

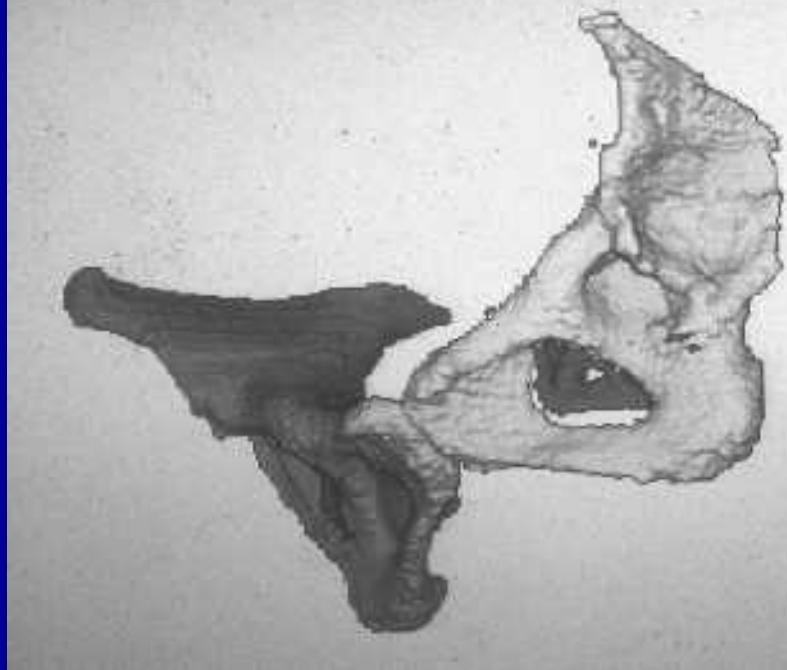
High dislocation

The femoral head is migrated
superiorly and posteriorly to the
hypoplastic true acetabulum





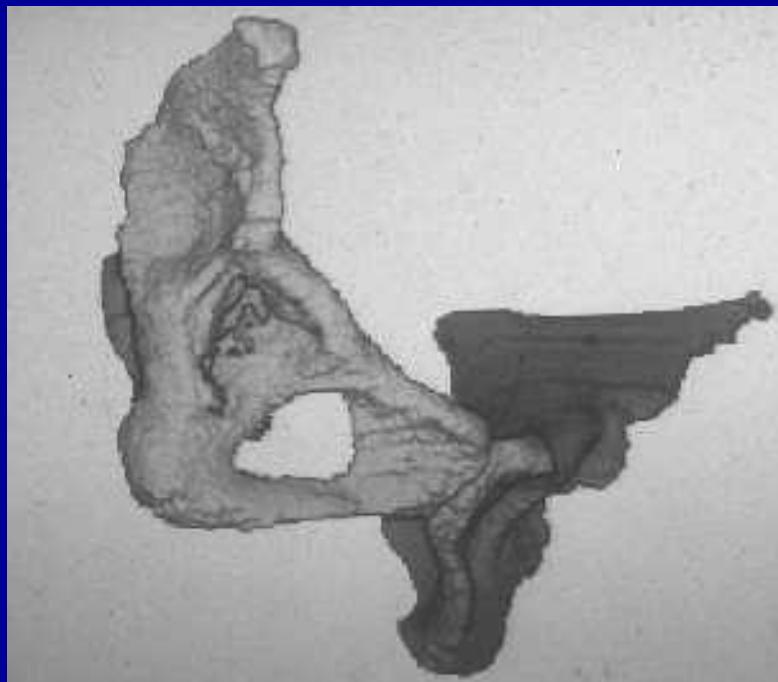
High dislocation



**Onset of symptoms
(Pain)**

With false acet. 31y (18-40)

Without 46y (30-65)



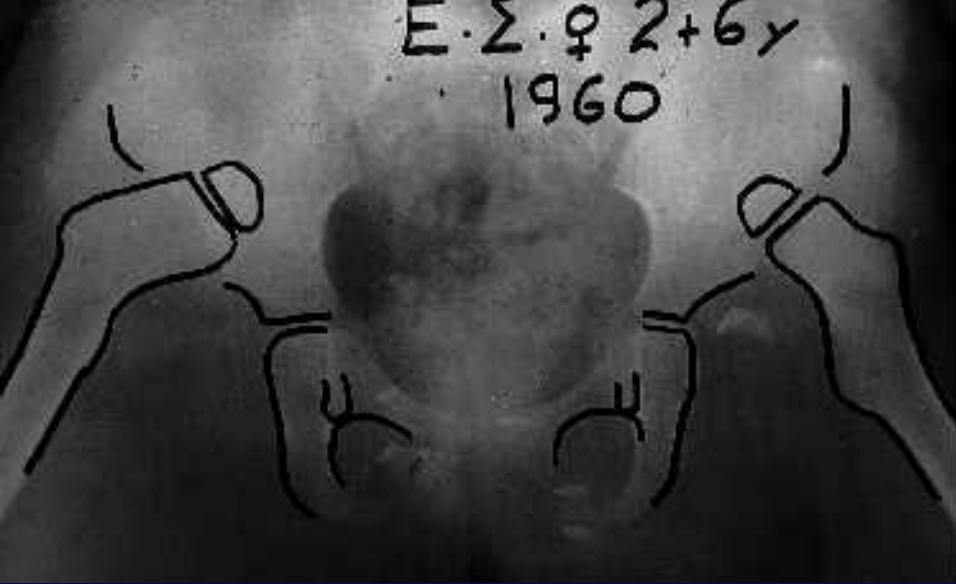
Cong. Hip Disease

Infancy

- Dysplasia
- Subluxation
- Dislocation

Adult Life

- Dysplasia
- Low dislocation
- High dislocation



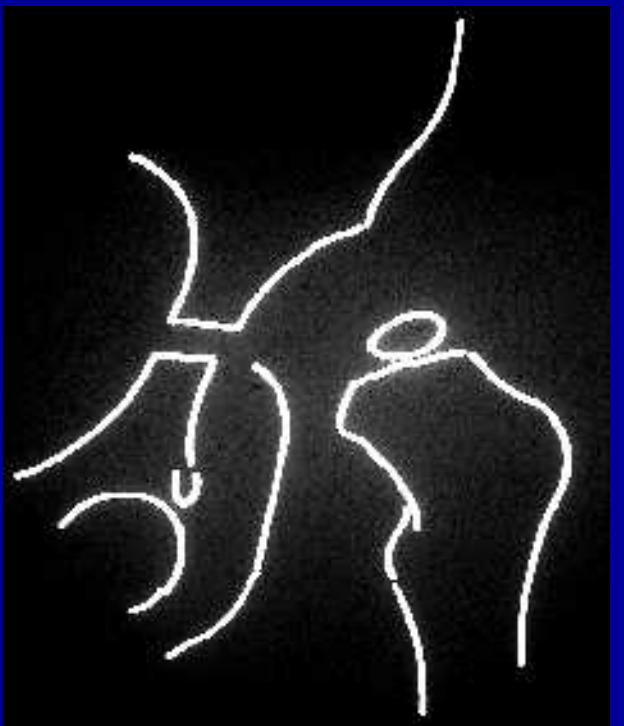


6m.



7y.

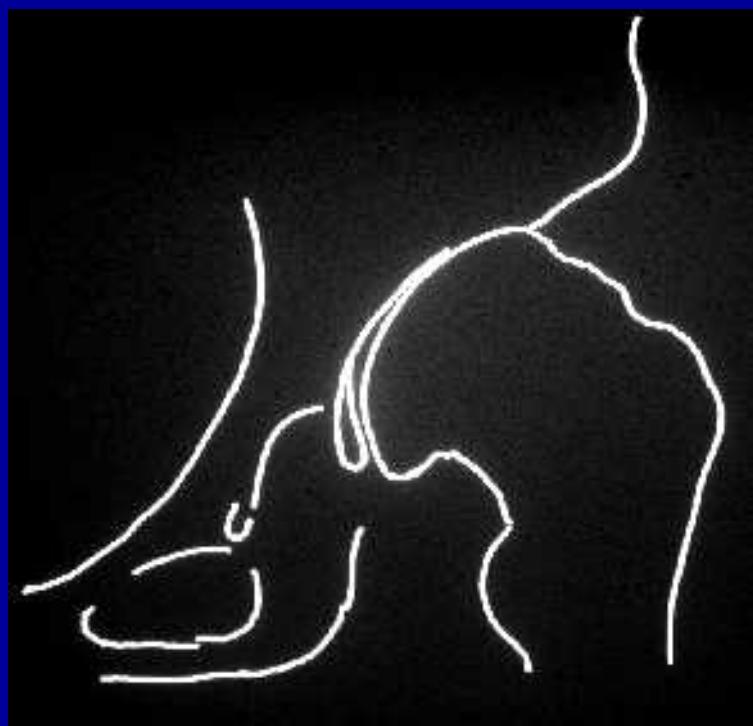
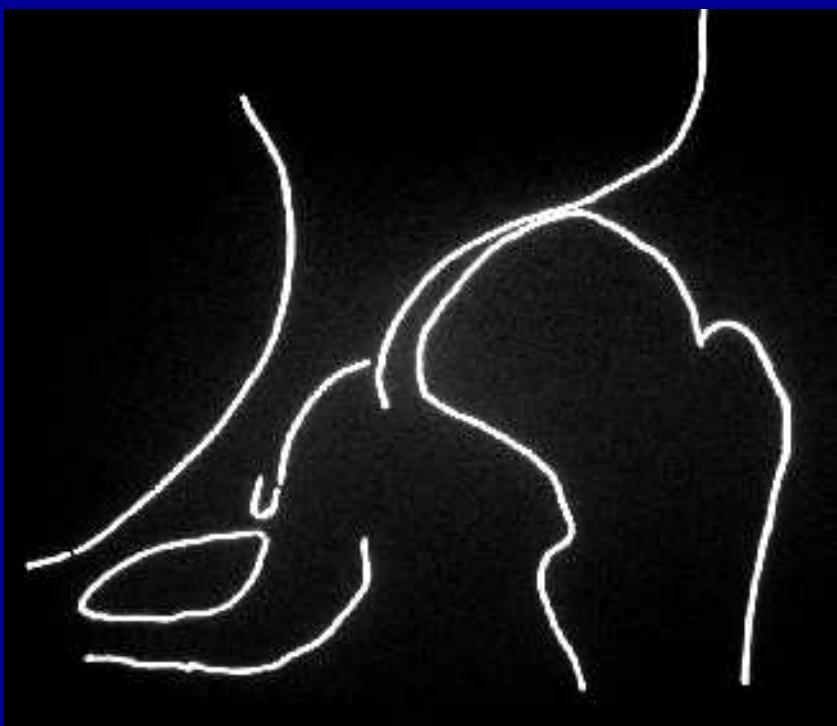




M.I
16 yrs



M.I
37 yrs



3y.



35y.

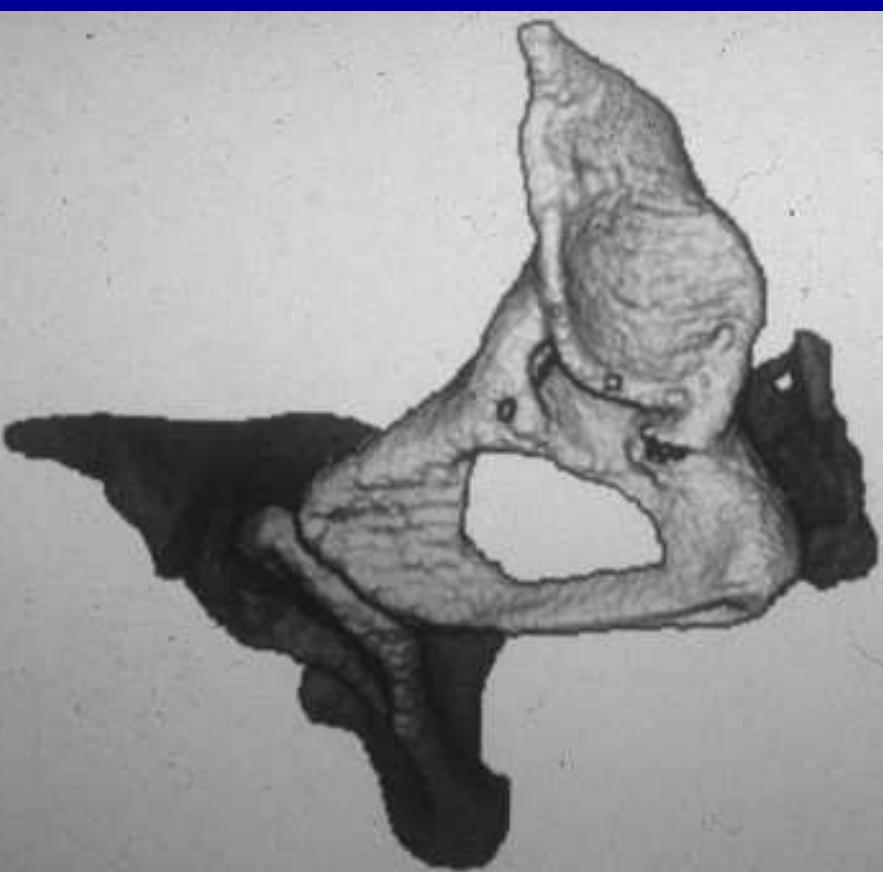
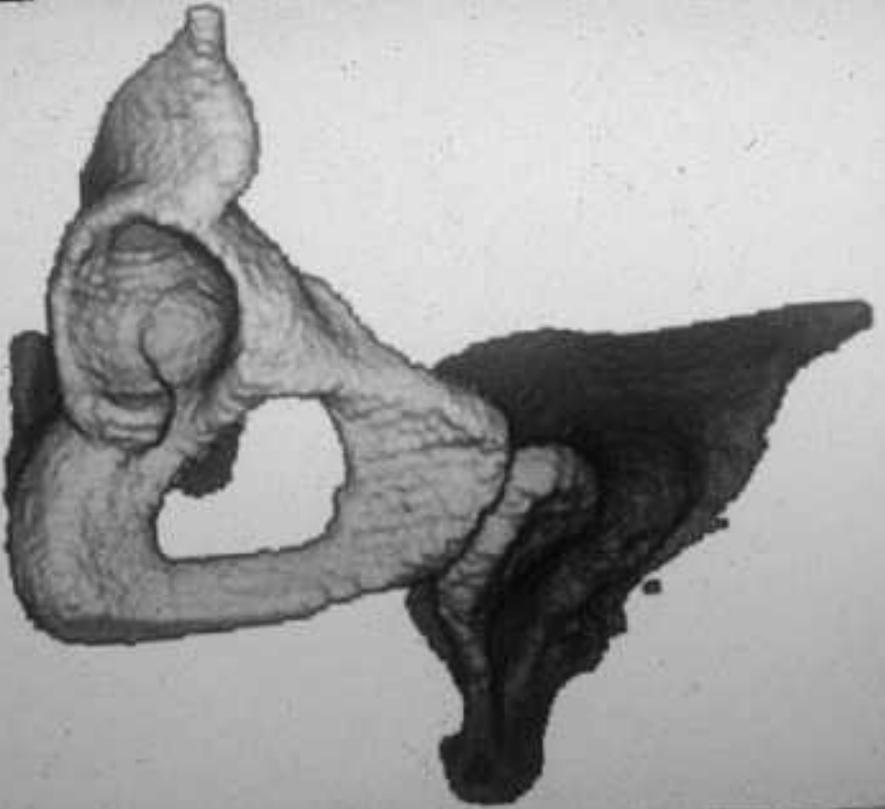


Θ.Κ.δ 1



Θ.Κ. 9





Conclusions 1

For better communication, treatment planning & evaluation of results, a common terminology is needed to express the total spectrum of the congenital malformations of the hip.

Conclusions 2

We propose the use of the general term
Congenital Hip disease & the
classification of it to dysplasia, low
dislocation and high dislocation.

Thank you