Congenital Hip Disease

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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 Wasylenko  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
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

<table>
<thead>
<tr>
<th>Type</th>
<th>N. of Hips</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dysplasia</td>
<td>170 (47.7%)</td>
</tr>
<tr>
<td>Low Disloc</td>
<td>85 (23.9%)</td>
</tr>
<tr>
<td>High Disloc</td>
<td>101 (28.4%)</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Infancy</th>
<th>Adult Life</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dysplasia</td>
<td>-</td>
</tr>
<tr>
<td>Subluxation</td>
<td>-</td>
</tr>
<tr>
<td>Dislocation</td>
<td>-</td>
</tr>
</tbody>
</table>
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.
We propose the use of the general term **Congenital Hip disease** & the classification of it to **dysplasia, low dislocation** and **high dislocation**.
Thank you