

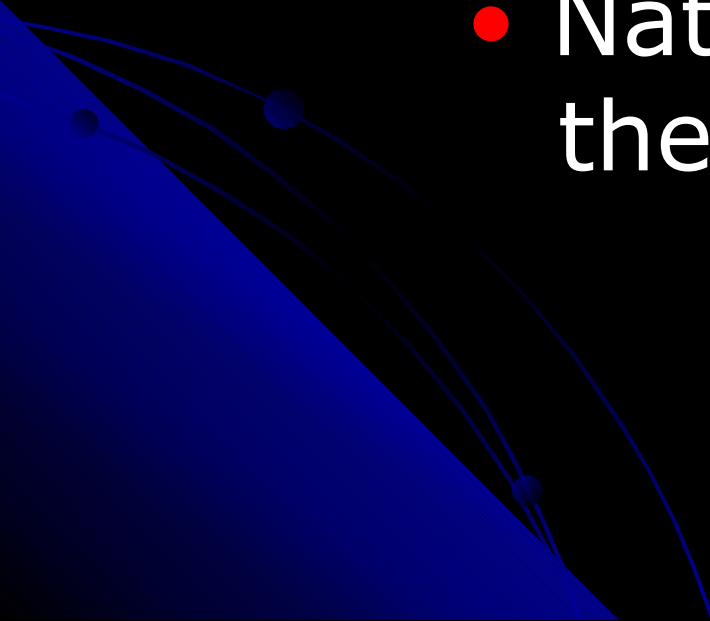
Osteoarthritis of the Hip

Diagnosis must precede treatment



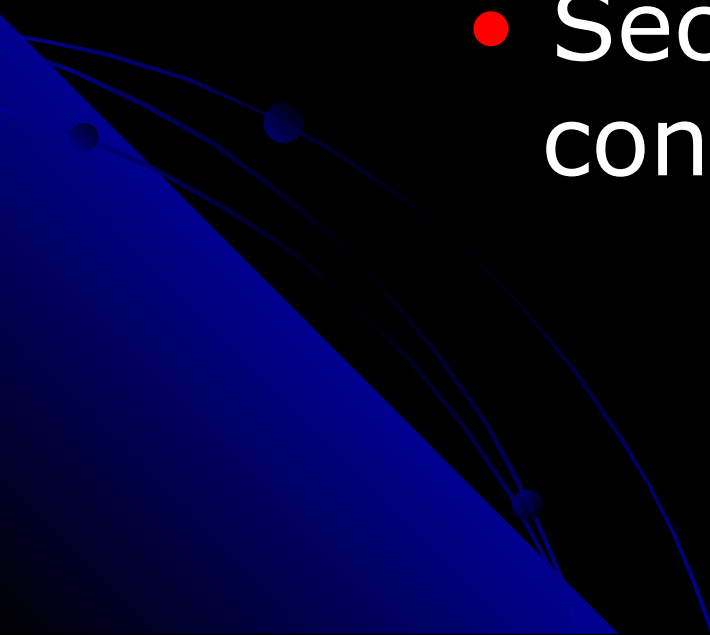
George Hartofilakidis

Required Knowledge

- Classification of OA of the hip
 - Natural history of the different types
- 

Osteoarthritis of the Hip

Classification

- Idiopathic
 - Secondary, mainly to congenital hip disease
- 

Classification of 660 Hips with Osteoarthritis

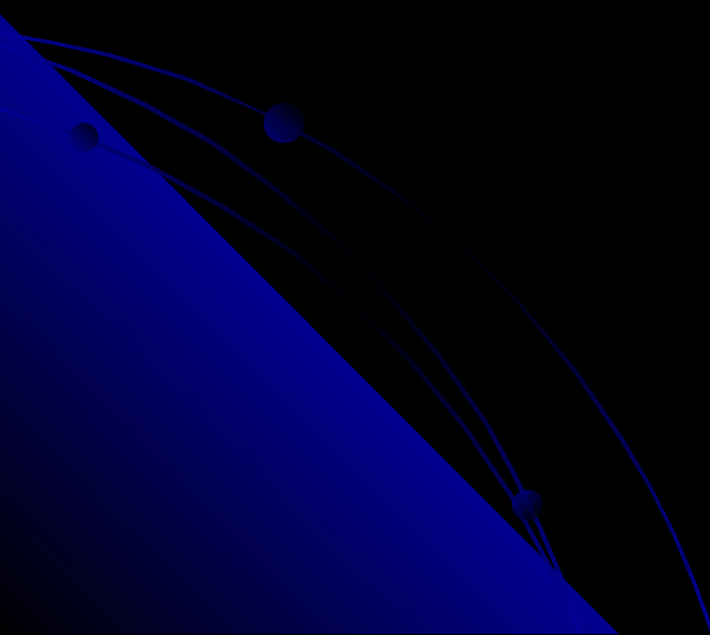
<u>Type</u>	<u>n. of Hips</u>
Secondary to CDH	356 (54%)
Idiopathic	272 (41%)
Uncertain	32 (5%)

Osteoarthritis

Idiopathic

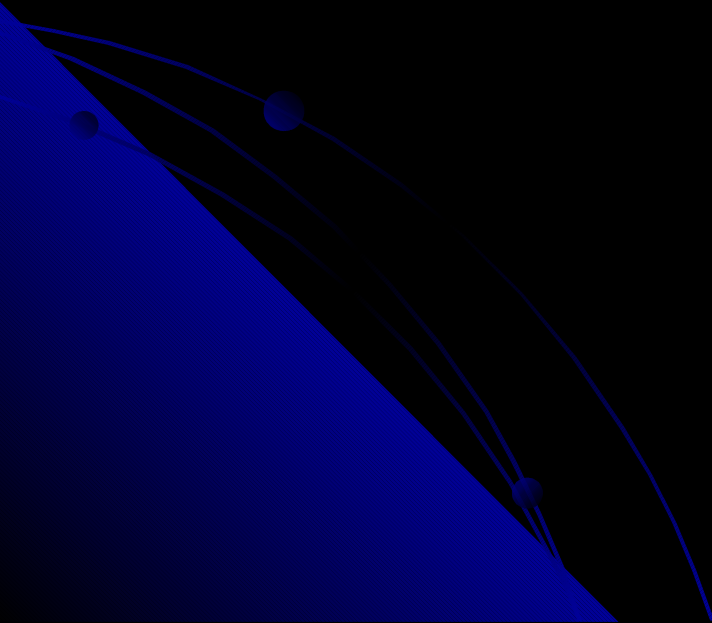
✓ Eccentric

✓ Concentric



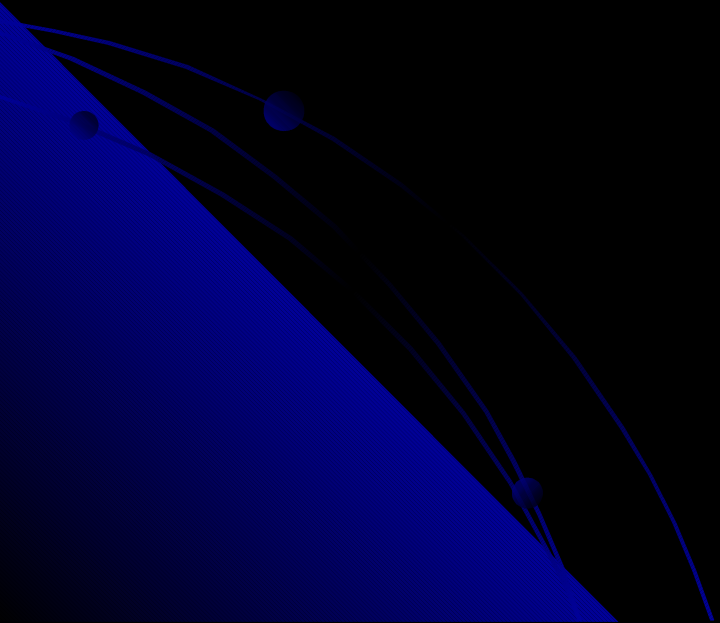
Eccentric OA

Rapid
Deterioration



Concentric OA

Slow Deterioration





Eccentric OA



Eccentric OA

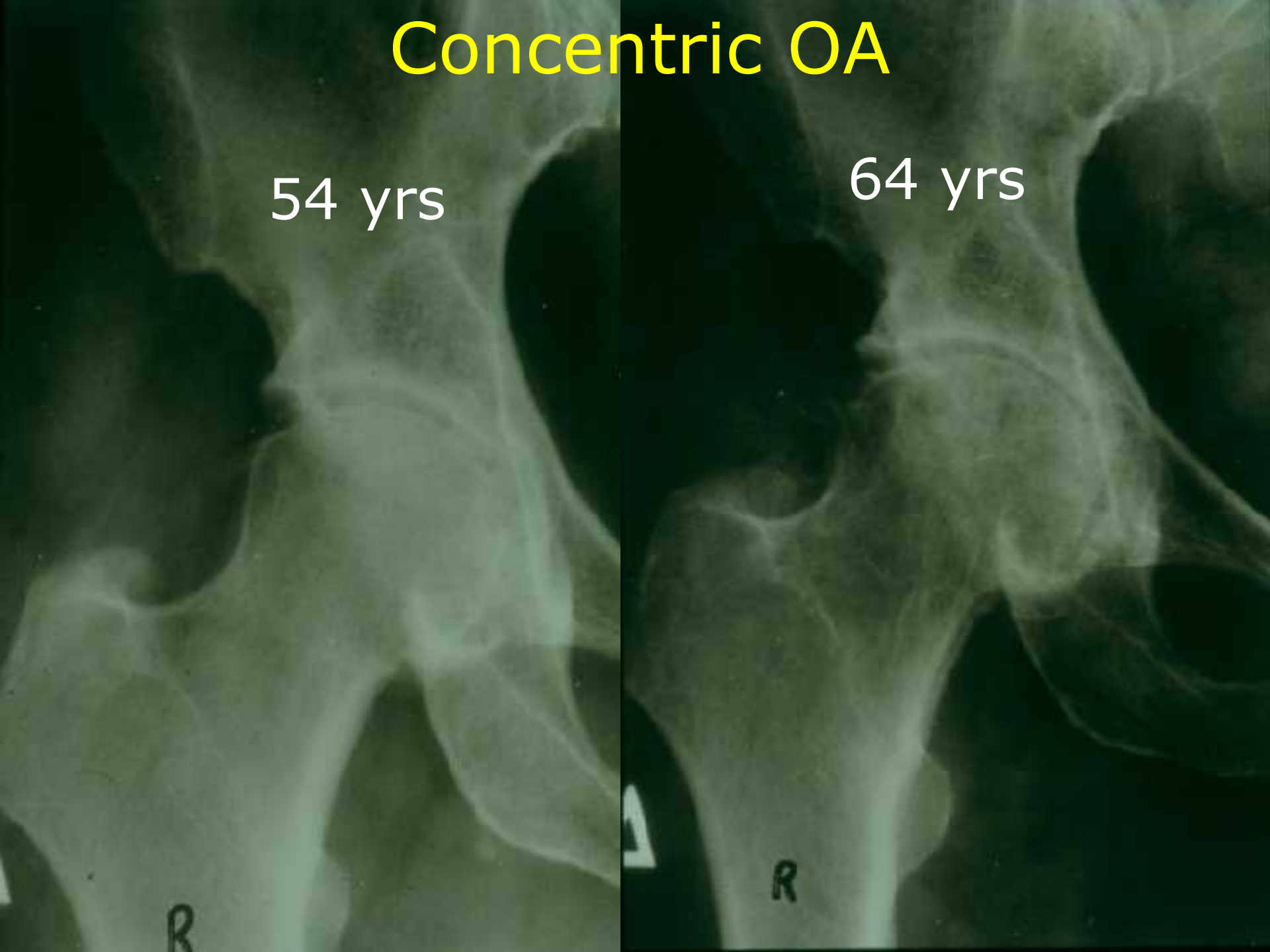
Concentric OA

54 yrs

64 yrs

R

R



Idiopathic Osteoarthritis of the Hip: Incidence, Classification and Natural History of 272 cases.

G. Hartofilakidis, Th.Karachalios

Orthopedics, February 2003



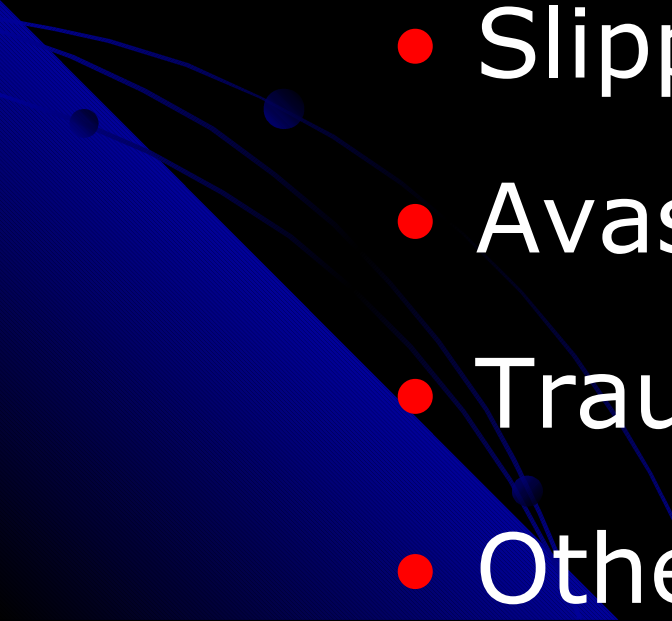
Idiopathic Osteoarthritis

n= 272

<u>Type</u>	<u>n. of Hips</u>
Eccentric	218 (80%)
Concentric	54 (20%)

Osteoarthritis of the Hip

Secondary

- Congenital hip disease
 - Osteochondritis
 - Slipped capital epiphysis
 - Avascular necrosis
 - Trauma
 - Others
- 

~~Congenital Dislocation (CDH)~~

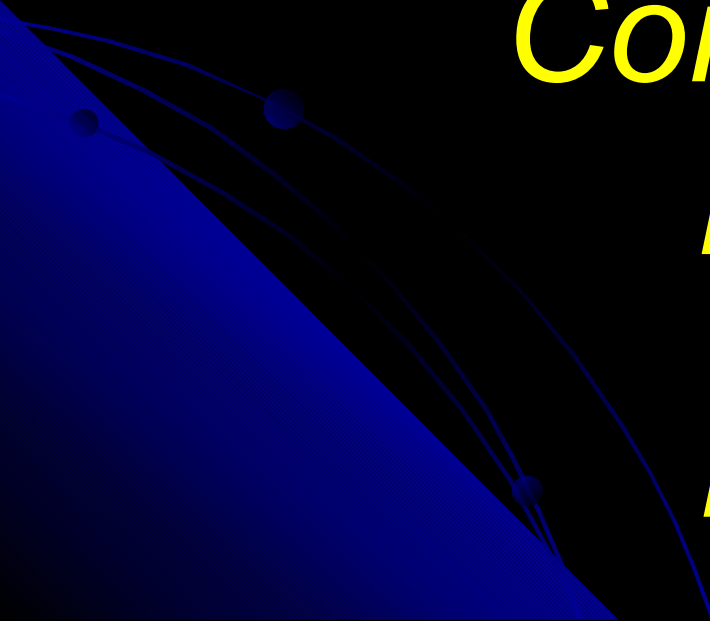
~~Developmental Dysplasia (DDH)~~

Congenital Hip Disease (CHD)

Congenital Hip Disease (CHD)

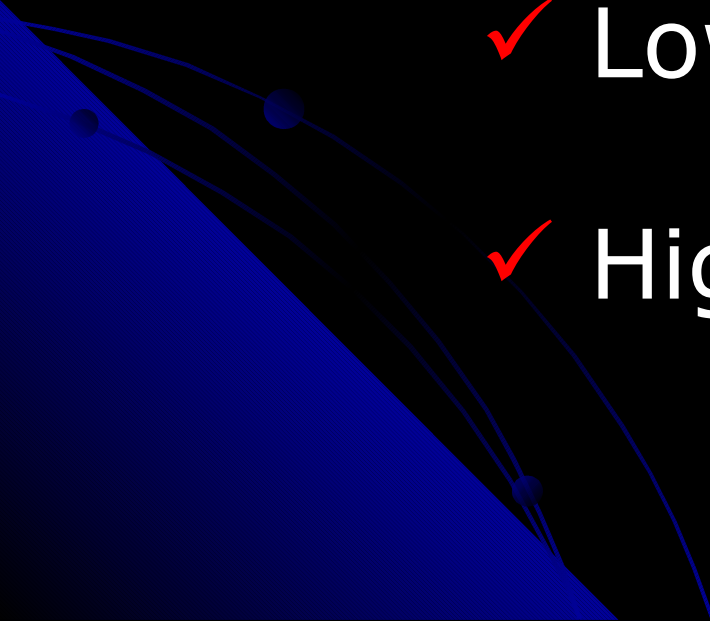
Stanisavljenic and Mitelev	JBJS Am 1963
Arnold et al.	JBJS Am 1964
Robin et al	Am J Publ Health 1973
Harris and Stulberg	JBJS Am 1973
Wedge and Wasylenko	Clin Orthop 1978
Walker	JBJS Am 1978
Thomas et al	JBJS Am 1982
Hartofilakidis et al	JBJS Am 1996

*Classification
of
Congenital Hip
Disease
in Adults*



- ✓ Eftekhar 1978
- ✓ Crowe et al 1979
- ✓ Hartofilakidis 1988

Hartofilakidis et al Classification

- ✓ Dysplasia
 - ✓ Low dislocation
 - ✓ High dislocation
- 

The Hartofilakidis et al CHD Classification system

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

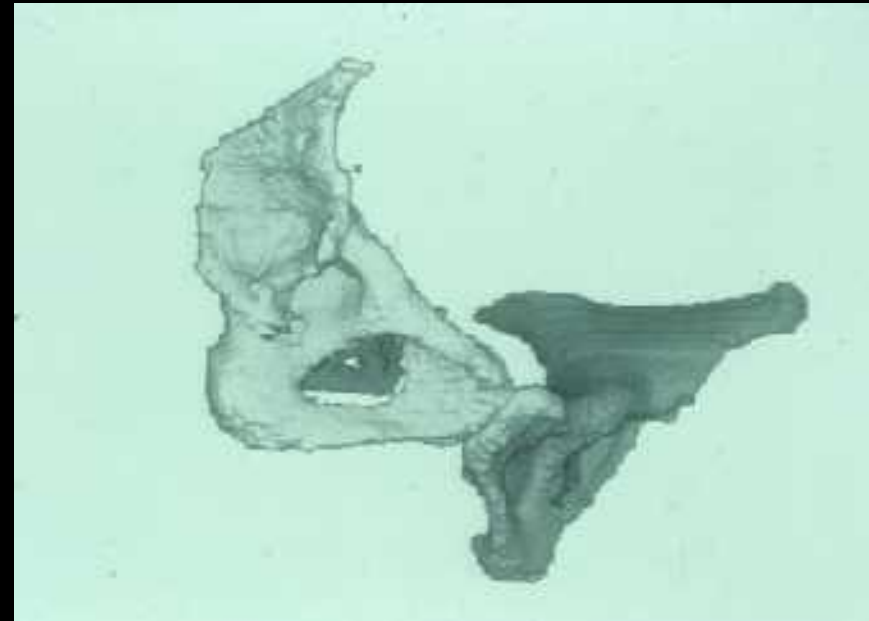
Type A - Dysplasia

The femoral head is contained within the original acetabulum

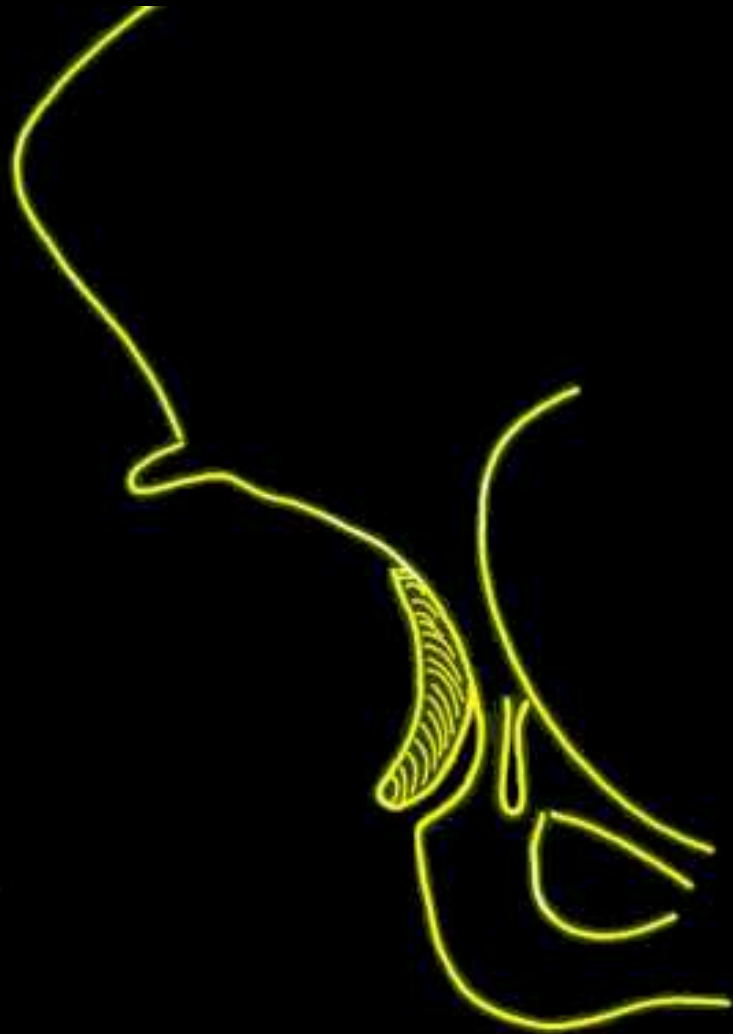


Type B – Low Dislocation

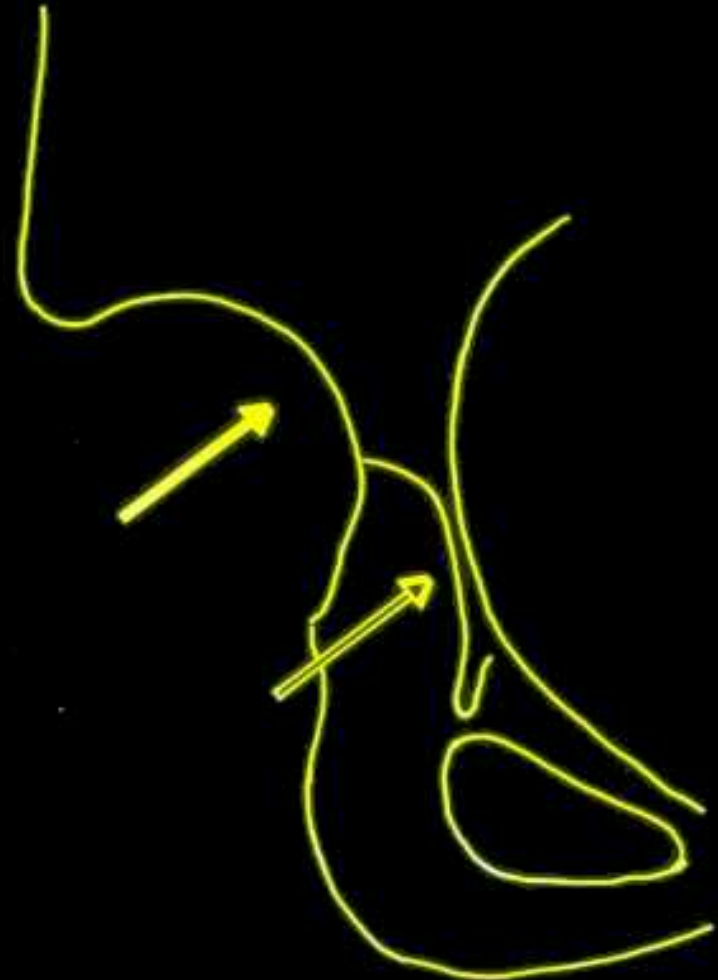
The femoral head articulates with a false acetabulum that partially covers the true acetabulum.



Dysplasia

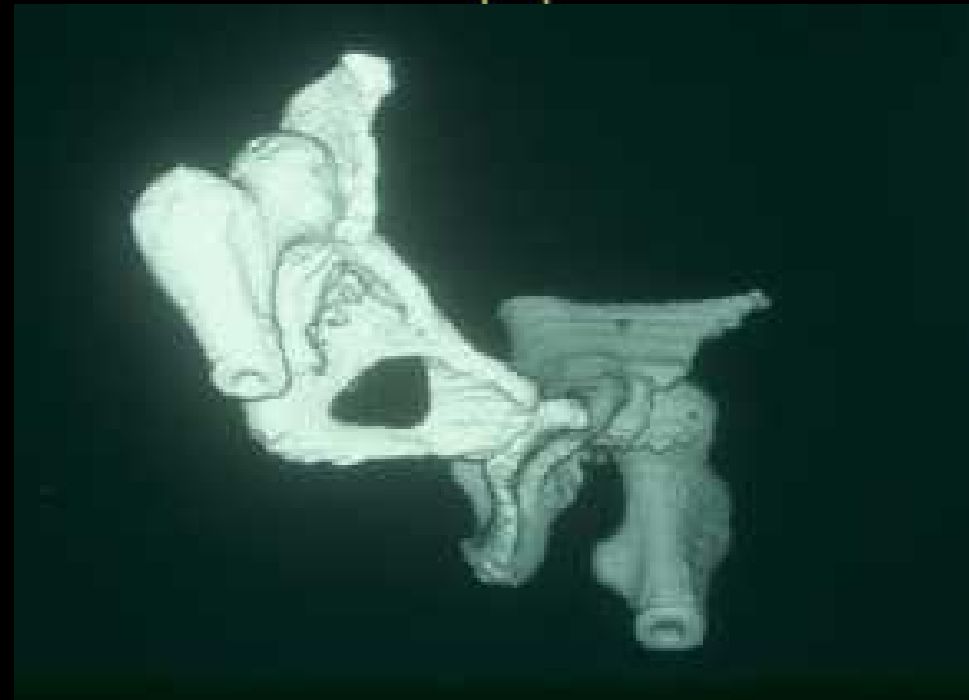


Low Dislocation



Type C – High Dislocation

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



Epidemiology, Demographics and Natural History of CHD in Adults

G. Hartofilakidis, Th. Karachalios,
K. Stamos

Orthopedics, August 2000



Congenital Hip Disease

n= 356

Type	n. of Hips
Dysplasia	170 (47.7%)
Low Dislocation	85 (23.9%)
High Dislocation	101 (28.4%)

At Wrightington Hospital we are using the classification of Hartofilakidis et al because it describes the acetabular pathology more precisely.

P. Bobak, B.M. Wroblewski et al
J Bone Joint Surg 82B, 2000

To define the inherent difficulties in the reconstruction of congenital hip dislocation, we have used the simple and effective classification of Hartofilakidis et al.

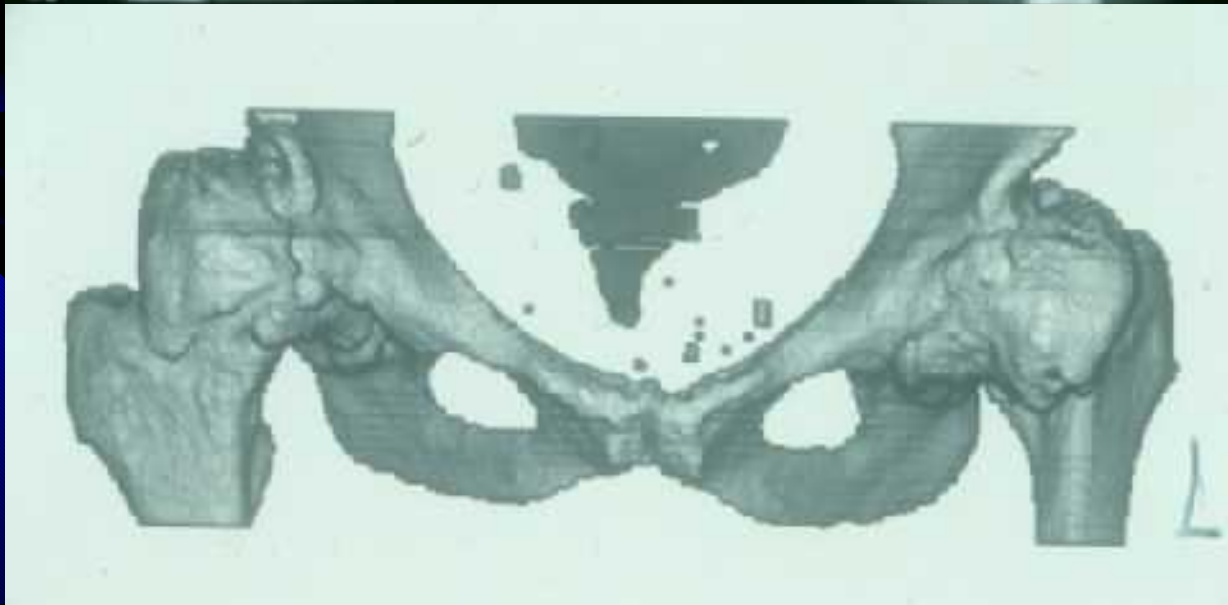
W. Harris in the "Adult Hip", 1998

Total Hip Replacement for the Dislocated Hip

G. Jaroszynski et al.

JBJS Am Feb 2001

The classification that we find most practical is that of Hartofilakidis et al: dysplasia, low dislocation and high dislocation

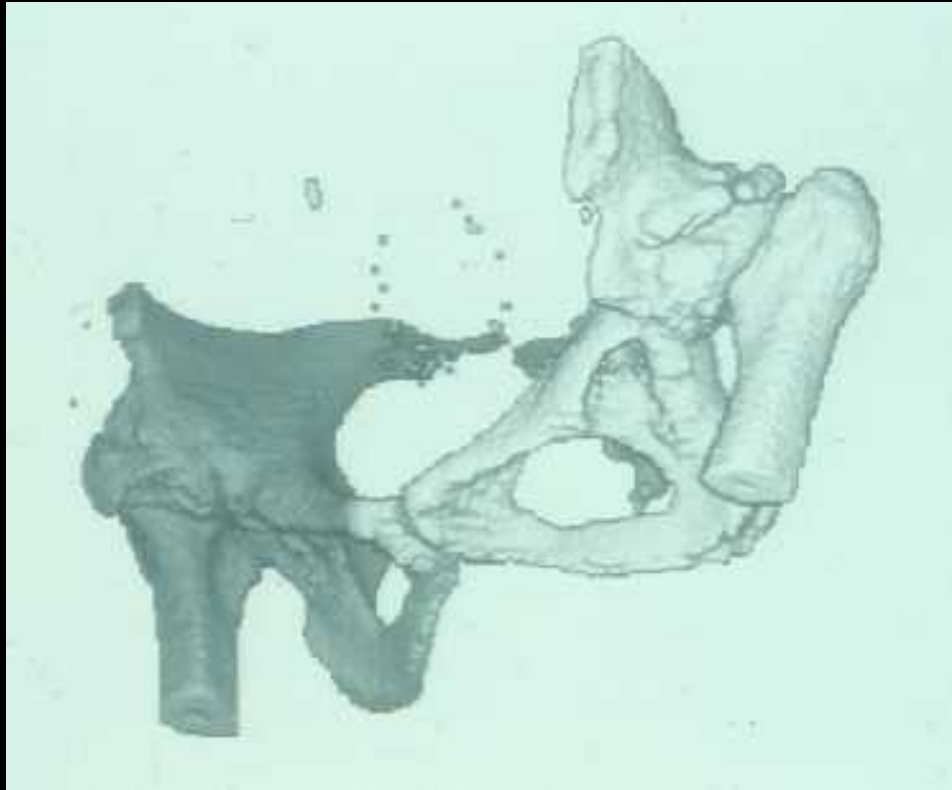
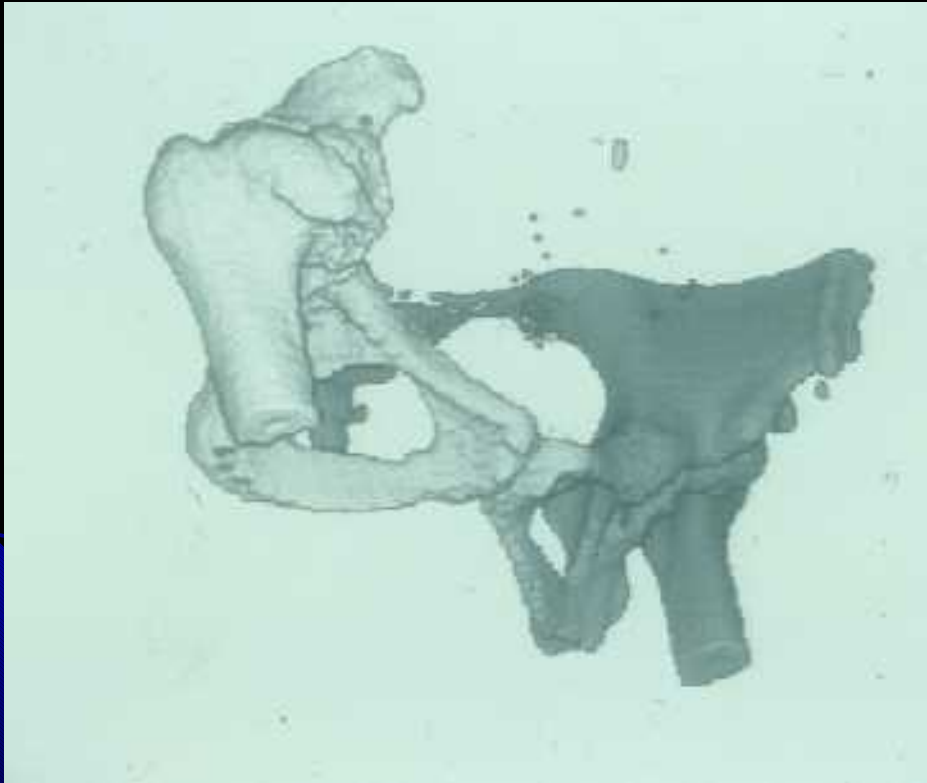


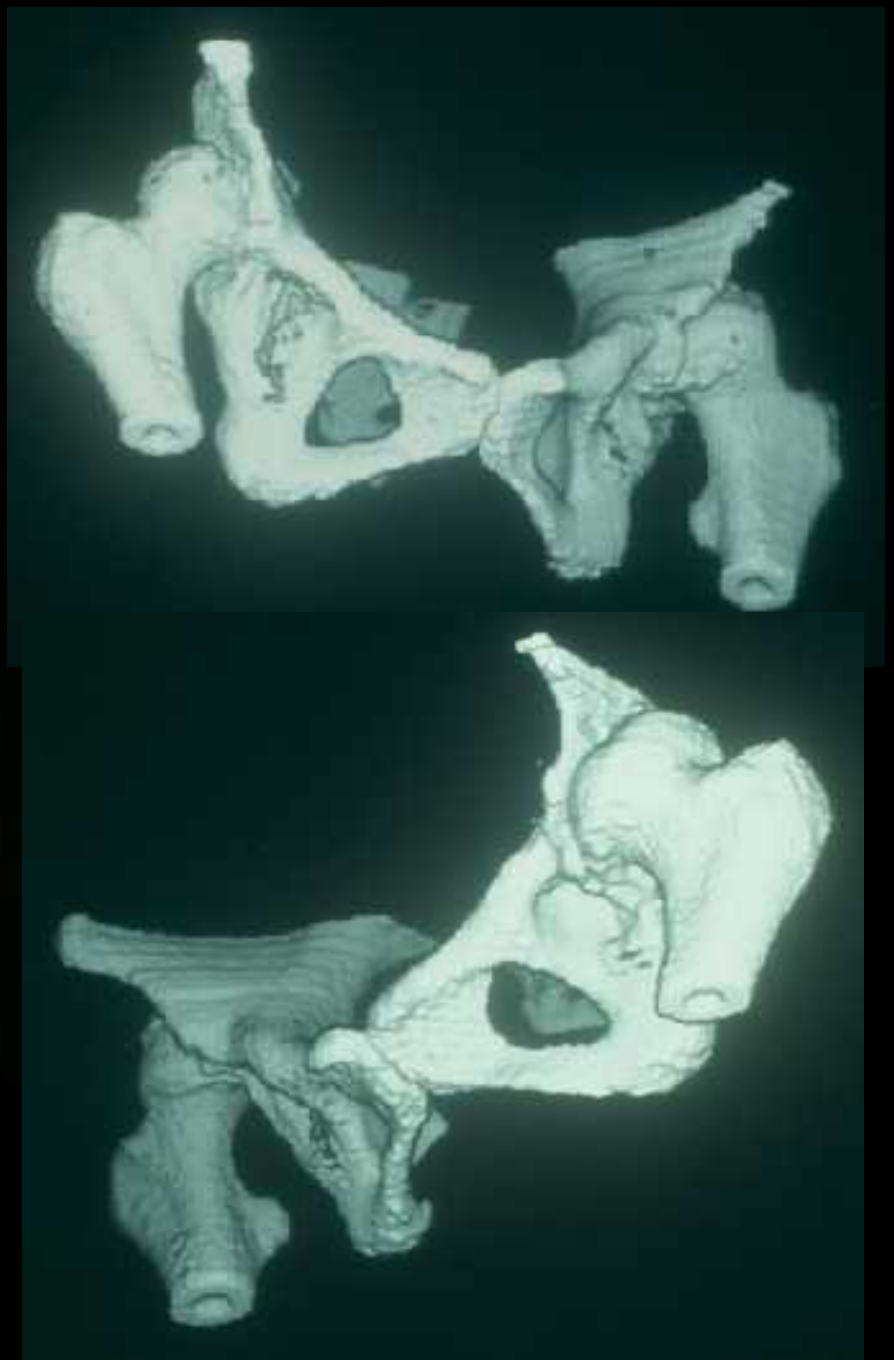




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