

IS THE KENT HIP A VIABLE THERAPEUTIC OPTION FOR THE HIP ARTHROPLASTY?

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ABSTRACT

SUMMARY STATEMENT

THE PERCENTAGE OF HIP REVISION IS AROUND 6% AT FIVE YEARS AND 12% AT TEN YEARS AFTER A PRIMARY ARTHROPLASTY. THIS PROSPECTIVE STUDY REVEALS A THERAPEUTIC OPTION FOR PERIPROSTHETIC FRACTURES, PROXIMAL FEMUR TUMORS AND ASEPTIC OR SEPTIC OSTEOLYSIS.

MATERIAL AND METHOD

FOURTEEN PATIENTS WERE TREATED WITH THE KENT HIP (BIOMET EUROPE, DORDRECHT, THE NETHERLANDS) BETWEEN 2006 AND 2012 FOR A NUMBER OF INDICATIONS SUCH AS PERIPROSTHETIC HIP FRACTURES (7 PATIENTS), PROXIMAL FEMUR TUMORS (3 PATIENTS), CUT OUT FOLLOWING INTERNAL FIXATION (ONE PATIENT), SEPTIC LOOSENING (ONE PATIENT), AND ASEPTIC LOOSENING (ONE PATIENT) AND SEVER RENAL OSTEODYSTROPHY (OSTEOPOROSIS T SCORE OF -4,9 AT THE HIP, ONE PATIENT).

RESULTS

AVERAGE FOLLOW-UP WAS 12 MONTHS, EXCEPT FOR ONE PATIENT WHO DIED. THE AVERAGE TIME TO FULL WEIGHT BEARING WAS 3 DAYS AND THE AVERAGE FUNCTIONAL HIP HARRIS SCORE WAS 72% AT 1 YEAR POSTOPERATIVE. SUBJECTIVE EVALUATION WAS FAIR WITH 21% OF THE PATIENTS THAT WERE

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DISAPPOINTED REGARDING THE FUNCTIONAL TESTS AT ONE YEAR AFTER SURGERY.

CONCLUSION

THESE FUNCTIONAL RESULTS EVEN WHEN COMPARED WITH OTHER SIMILAR, NEWER, MORE COMPLEX AND MORE EXPENSIVE IMPLANTS ARE VERY GOOD. DESPITE THE SMALL NUMBER OF PATIENTS WE CONSIDER THAT THE KENT HIP SYSTEM CAN BE USED WITH GOOD RESULTS IN SELECTED CASES DUE TO ITS TECHNICAL ADVANTAGES SUCH AS EXCELLENT DISTAL LOCKING IN THE FEMORAL CANAL AND VERSION, OFFSET AND LIMB LENGTH CORRECTION.

KEYWORDS: KENT HIP, MODULAR PROSTHESIS, FEMORAL, REVISION, ARTHROPLASTY