Patients Undergoing Revision Hip Arthroscopy Demonstrate Worse Postoperative Outcomes but Achieve Clinically Significant Outcomes at Similar Rates Compared to Patients Undergoing Primary Hip Arthroscopy: A Propensity Matched Study with Minimum 5-Year Follow Up

Reagan Chapman¹, Thomas W Fenn, Mario Hevesi, Shane Jay Nho¹ Midwest Orthopaedics at Rush

INTRODUCTION: This propensity matched retrospective cohort study sought to determine differences in mid-term clinical outcomes at 5-years between patients undergoing primary hip arthroscopy (HA) vs. revision hip arthroscopy (RHA) for femoroacetabular impingement syndrome (FAIS).

METHODS: A retrospective cohort study was conducted on patients who underwent revision hip arthroscopy for FAIS from January 2012 to April 2017. These patients were matched using propensity score analysis in a 1:4 ratio by age, sex, and body mass index (BMI) to patients who underwent primary HA. Preoperative and postoperative radiographs were assessed. Patient-reported outcomes (PROs) preoperatively and at 5-years including the Hip Outcome Score Activities of Daily Living subscale (HOS-ADL) and Sport-Specific subscale (HOS-SS), modified Harris Hip Score (mHHS), international Hip Outcome Tool (iHOT-12), and Visual Analog Scale (VAS) for Pain and Satisfaction were compared between groups using an independent t-test with an a priori significance level of 0.05. Minimally clinically important difference (MCID) and patient acceptable symptomatic state (PASS) were calculated using previously published thresholds for HOS-ADL, HOS-SS, mHHS, iHOT-12, and VAS Pain.

RESULTS:

Fifty-one patients who underwent revision HA (35 female, 16 male, age: 32.6 ± 10.2 years; BMI: 26.5 ± 5.9 kg/m2) were propensity matched by age, gender, and BMI to 204 patients who underwent primary HA (140 female, 64 male, age: 33.3 ± 11 years; BMI: 25.1 ± 4.8 kg/m2). There were no significant differences in sex (p > 0.99), age (p = 0.714), and BMI (p = 0.069) between groups, supporting satisfactory matching. There were no significant differences in Lateral Center Edge Angle (LCEA), Tonnis Angle, or Alpha Angle on preoperative radiographs. There was a significant difference in LCEA (RHA: 27.5 ± 6.6 vs HA 30.0 ± 5.8 , p=0.023) on postoperative radiographs.

Both groups demonstrated significant postoperative improvements in all outcome scores measured (p \leq 0.001). There were no significant differences in preoperative or Delta PROs for patients undergoing revision HA compared to primary HA. There were significant differences in outcomes at 5-years for HOS-SS (RHA: $64.9 \pm 32.5 \text{ vs.}$ HA: $75.3 \pm 26.2 \text{ p} = 0.044 \text{)}$, mHHS (RHA: $72.2 \pm 22.4 \text{ vs.}$ HA: $80.1 \pm 18.1 \text{ p} = 0.039 \text{)}$, iHOT-12 (RHA: $61.4 \pm 29.3 \text{ vs.}$ HA: $71 \pm 27.6 \text{ p} = 0.043 \text{)}$, and VAS Satisfaction (RHA: $63 \pm 34.9 \text{ vs.}$ HA: $77.7 \pm 29.6 \text{ p} = 0.013 \text{)}$ for patients undergoing revision HA compared to primary HA patients. There were no significant differences in achieving MCID (p \geq 0.431)or PASS (p \geq 0.071) for HOS-ADL, HOS-SS, mHHS, or iHOT-12.

DISCUSSION AND CONCLUSION: Patients undergoing revision hip arthroscopy experience significantly worse outcomes overall compared to those undergoing primary hip arthroscopy for FAIS but meet thresholds for clinically significant outcomes at similar rates.

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Table 1. Demographics						
	WC	Controls	P-Value			
N	38	152				
Age	40.3 ± 9.3	40.4 ± 10.5	0.947			
Gender			1			
Male	13	52				
Female	25	100				
BMI	29.1 ± 6	28.1 ± 6.6	0.397			

		ACID and PASS mpared to con		
	MCID			
	wc	Controls	P-Value	
N	38	152		
HOS-ADL	81.0%	68.4%	0.251	
HOS-SS	66.7%	71.3%	0.676	
mHHS	84.2%	65.6%	0.111	
iHOT-12	57.1%	76.1%	0.135	
		PASS		
	wc	Controls	P-Value	
N	38	152		
HOS-ADL	26.7%	48.2%	0.031*	
HOS-SS	30.0%	52.5%	0.025*	
mHHS	44.4%	48.1%	0.725	
iHOT-12	39.3%	50.0%	0.301	

	Preoperative			
	wc	Controls	P-Value	
N	38	152		
HOS-ADL	41.8 ± 19.2	61.7 ± 17.5	< 0.001	
HOS-SS	25.8 ± 26.9	39.6 ± 20.6	0.005*	
mHHS	43.2 ± 14.6	56.8 ± 15.1	<0.001	
iHOT-12	18.4 ± 15.6	32.4 ± 17.4	0.006*	
VAS Pain	71.1 ± 21	58.7 ± 21.4	0.005*	
	5-Year			
	wc	Controls	P-Value	
N	38	152		
HOS-ADL	72.1 ± 24.9	83.1 ± 19.6	0.009*	
HOS-SS	57.6 ± 31.4	71.6 ± 28.5	0.017*	
mHHS	70.1 ± 22.5	75.4 ± 19.4	0.211	
iHOT-12	57.8 ± 35	64.8 ± 29.2	0.264	
VAS Pain	41.9 ± 34.3	27 ± 27.4	0.025*	
VAS Satisfaction	72.9 ± 38.4	77.8 ± 31.1	0.475	
	Delta PROs			
	wc	Controls	P-Value	
N	38	152		
HOS-ADL	33.2 ± 22.9	21.5 ± 26	0.060	
HOS-SS	32.7 ± 30.8	33.8 ± 34.5	0.890	
mHHS	24.3 ± 15.3	19.1 ± 24.5	0.374	
iHOT-12	36.5 ± 31.9	34.8 ± 30.5	0.849	
VAS Pain	29.1 ± 33.1	31.6 ± 32.3	0.727	

	Preoperative Radiographs			
	wc	Controls	P-Value	
N	38	152		
LCEA	34.4 ± 9.6	32 ± 6.2	0.158	
Tonnis	5.7 ± 5	6.2 ± 4.3	0.623	
Alpha Angle	63.6 ± 14.2	58.2 ± 12.2	0.029*	
	Postoperative Radiographs			
	wc	Controls	P-Value	
N	38	152		
LCEA	31 ± 6.1	30.3 ± 6.1	0.542	
Tonnis	7 ± 4.7	6.5 ± 4.3	0.564	
Alpha Angle	37.2 ± 4.9	39.6 ± 9.3	0.131	