Effect of Pre-operative Opioid Consumption on Hip Arthroscopy for Femoroacetabular Impingement and Labral Tears Outcomes: A Minimum 2-Year Follow-Up Study

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INTRODUCTION:
Presurgical opioid-based pain control is recognized as an adverse prognostic factor in various orthopedic surgical interventions. The purpose of this study is to report short-term outcomes of self-reported preoperative opioid-based pain control management in patients who underwent hip arthroscopy for femoroacetabular impingement (FAI) and labral tears. A secondary analysis compared these results to a benchmark control group of patients without preoperative opioid consumption.
METHODS:
Data were prospectively collected and retrospectively analyzed for patients who underwent primary hip arthroscopy for FAI and labral tears between 2009 and 2021. Patients were included if they reported preoperative daily opioid-based pain control medications (PO) within one year of surgery and had completed pre- and postoperative patient-reported outcomes (PROs) with a minimum of 2 years of follow-up. Clinically relevant thresholds, revision surgery, and conversion to arthroplasty rates were included in the analysis. Patients were propensity matched to a benchmark control group of patients without preoperative opioid consumption in a 1:1 ratio based on sex, age at surgery, body mass index, Acetabular Outerbridge Grade, labral treatment, and capsular treatment.
RESULTS: 472 patients were included in the study, with 236 patients in the PO cohort successfully matched to 236 control cases of non-opioid consumption patients. The PO group displayed significant improvements across all PROs and high patient satisfaction. However, compared to the benchmark control group, PO patients started with lower preoperative scores for mHHS, NAHS, and VAS. Similar magnitudes of improvement were observed for mHHS, NAHS, HOS-SSS, and VAS, reaching similar postoperative scores. Despite these improvements, PO patients reported significantly lower patient satisfaction at the latest follow-up. Both groups achieved MCID and PASS at similar rates, and no significant differences were observed in complications or secondary surgeries.
DISCUSSION AND CONCLUSION:
Hip arthroscopy for the treatment of FAI and labral tears in patients with preoperative daily opioid-based pain control medications resulted in significant short-term improvements in functional scales. However, compared to a benchmark control group, these patients achieved lower patient satisfaction, which should be considered when managing patient expectations.