

Superimposed Crystalline Arthropathy in Total Joint Arthroplasty: Impact on Periprosthetic Joint Infection Workup

Anzar Sarfraz¹, Casey Cardillo, Shiv Lamba, Harrison Potak, Ran Schwarzkopf², Vinay Aggarwal

¹NYU Langone, ²NYU Langone Orthopedic Hospital, Hospital For Joints

INTRODUCTION:

Diagnostic workup of peri-prosthetic joint infection (PJI) after total joint arthroplasty (TJA) remains a challenge. Our study aims to assess the prevalence of crystalline arthropathy (CA) in a large group of patients undergoing PJI workup after TJA and to compare the impact of CA on diagnostic criteria in patients with and without PJI.

METHODS:

A retrospective study of 703 TJA patients who underwent joint aspiration sent for crystal analysis and PJI workup between June-2011 and January-2024 was conducted. Patient demographics, serum (erythrocyte sedimentation rate [ESR], C-reactive protein [CRP]), and synovial (white blood cell [WBC] count, neutrophil percentage [PMN]) lab values were collected. Patients were categorized into cohorts based on presence of crystalline arthropathy (either monosodium urate crystals [MSU] or calcium pyrophosphate dihydrate [CPPD]) from synovial fluid aspirates and based on whether they met ICM PJI criteria. Statistical significance was reported as median of lab values.

RESULTS:

Of the 703 patients, 87 patients (12.4%) were positive for CA, of which 11 were MSU (1.4%) and 76 were CPPD (11%). Patients who were negative for crystals and positive for PJI had higher median serum ESR (P<0.030) and synovial fluid PMN % (P<0.001) values compared to the cohort that was positive crystals and positive PJI. The patient cohort with positive crystals and positive PJI had a higher serum CRP (P<0.001) and synovial fluid WBC (P<0.001) median values compared to the cohort negative for crystals and positive for PJI.

DISCUSSION AND CONCLUSION:

The prevalence of CA after TJA in patients undergoing PJI workup is greater than previously reported (12.4%). Our study showed that PJI seems to increase synovial WBC and PMN% more than CA does, however, further studies should be done to identify any recurring trends on how CA complicates of diagnostic workup of PJI in TJA patients.

Table 1: Patient Demographics			
	Negative for Crystals n = 616 (87.6%)	Positive for Crystals n = 87 (12.4%)	P-value
Sex, n (%)			0.878
Male	295 (47.9)	43 (49.4)	
Female	321 (52.1)	44 (50.6)	
Mean Age (years), [range]	64.04 [24 - 91]	67.42 [38 - 96]	0.001
Race, n (%)			0.549
White	368 (59.7)	56 (64.3)	
African American	121 (19.6)	17 (19.5)	
Asian	14 (2.2)	3 (3.4)	
Other	113 (18.3)	11 (12.6)	
Smoking Status, n (%)			0.281
Current	41 (6.6)	3 (3.4)	
Former	282 (45.8)	39 (44.7)	
Never	313 (50.8)	51 (58.2)	
BMI (kg/m ²), mean [range]	31.01 (15.22 - 51.78)	29.49 (18.28 - 47.07)	0.874
ASA score, n (%)			
1	16 (2.6)	3 (3.4)	
2	317 (51.4)	41 (47.1)	
3	258 (41.8)	39 (44.8)	
4	25 (4.0)	4 (4.6)	
CCI, mean [range]	1.54 (1 - 4)	1.58 (1 - 4)	0.809
Diabetes, n (%)	123 (19.9)	17 (19.5)	0.999
Rheumatism, n (%)	177 (28.7)	19 (21.8)	0.224
Septic arthritis, n (%)	77 (12.5)	6 (6.9)	0.180
Aseptic arthritis, n (%)	100 (16.2)	13 (14.9)	0.879

CCI, Body Mass Index, ASA, American Society of Anesthesiologists score, CCI, Charlson Comorbidity Index

Table 2. Demographics and Key Lab Values based on types of Crystals				
	Negative for Crystals n = 616 (87.6%)	MSU n = 11 (1.4%)	CPPD n = 76 (11.2%)	P-value
Age (years), mean [range]	64.03 [24 - 91]	64.0 [31 - 77]	67.91 [38 - 96]	
Sex, n (%)				0.240
Men	295 (47.8)	8 (72.7)	35 (46.0)	
Women	321 (52.1)	3 (27.3)	41 (53.9)	
ESR, median [range]	51 [1.0 - 140.0]	75 [21.0 - 99.0]	41 [2.0 - 130.0]	0.309
CRP, median [range]	28.4 [1.1 - 129.0]	77.8 [2.9 - 241.0]	28.3 [1.1 - 604.9]	0.399
Synovial fluid				
WBC (x10 ⁶ /L), median [range]	2,325 [4.0 - 34000.0]	9,279 [118.0 - 12870.0]	2,841 [13.0 - 17120.0]	0.142
PMN %, median [range]	74 [0 - 99.0]	87 [2 - 90]	79 [1 - 91]	0.281

MSU, Monosodium urate crystals; CPPD, Calcium pyrophosphate dihydrate; ESR, erythrocyte sedimentation rate; CRP, C-reactive protein; WBC, white blood cell; PMN, Polymorphonuclear leukocyte

Table 3: Demographics and Key Lab Values based on Crystal Presence and PJI Status				
	+ Crystals, PJI n = 77	+ Crystals, -PJI n = 8	- Crystals, PJI n = 539	P-value
Age (years), mean [range]	64.16 [31 - 91]	60.83 [38 - 84]	65.96 [24 - 89]	0.5
Sex, n (%)				
Men	32 (41.5)	4 (50.0)	261 (48.7)	
Women	45 (58.4)	2 (33.3)	278 (51.2)	
ESR, median [range]	61 [5 - 140]	49 [5 - 140]	54 [5 - 140]	0.0
CRP, median [range]	61.4 [1.1 - 129.0]	19.7 [1.1 - 129.0]	25.4 [1.1 - 129.0]	
Synovial fluid				<0.001
WBC (x10 ⁶ /L), median [range]	31,221 [4.0 - 10000.0]	24,500 [10.0 - 10000.0]	1,008 [1.0 - 10000.0]	
PMN %, median [range]	80 [1 - 99]	81 [1 - 97]	66 [1 - 99]	

PJI, Periprosthetic joint infection; ESR, erythrocyte sedimentation rate; CRP, C-reactive protein; WBC, white blood cell; PMN, Polymorphonuclear leukocyte

Table 4: Demographics and Key Lab Values based on Crystal Presence and PJI Status			
	Positive n = 6	Negative n = 77	P-value
ESR -> 40	ESR -> 40	ESR -> 40	0.439
CRP -> 119	CRP -> 119	CRP -> 119	0.781
WBC -> 24,100	WBC -> 24,100	WBC -> 24,100	0.871
PMN % -> 85	PMN % -> 85	PMN % -> 85	0.222
ESR -> 40	ESR -> 40	ESR -> 40	0.587
CRP -> 119	CRP -> 119	CRP -> 119	0.672
WBC -> 24,100	WBC -> 24,100	WBC -> 24,100	0.618
PMN % -> 85	PMN % -> 85	PMN % -> 85	0.264
Total	67	81	703

PJI, Periprosthetic joint infection; ESR, erythrocyte sedimentation rate; CRP, C-reactive protein; WBC, white blood cell; PMN, Polymorphonuclear leukocyte