

# Delays in Diagnosis are Common Among Hip Preservation Surgical Candidates: A Systematic Review

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## INTRODUCTION:

The purpose of this study was to systematically review the literature on delays in diagnosis or treatment of hip preservation patients.

**METHODS:** A systematic review was performed by searching PubMed, the Cochrane Library, and Embase, up to November 5, 2024, to identify any study reporting on delays in diagnosis or treatment of hip preservation patients i.e. patients with femoroacetabular impingement syndrome (FAIS), hip dysplasia, or femoral torsion abnormalities. The search terms used were: *delay AND (diagnosis OR treatment) AND ("femoroacetabular impingement" OR "hip dysplasia" OR "hip arthroscopy" OR "periacetabular osteotomy")*. Outcomes reported included demographics, preoperative duration of symptoms, and patient-reported outcomes (PROs).

**RESULTS:** Twelve articles (1 Level II, 1 Level III, 10 Level IV) met inclusion criteria, with a total of 2,883 hips. Mean patient age ranged from 16.4 to 45.0 years, and the overall percentage of males ranged from 0 to 56.9%. The mean time from symptom onset to accurate diagnosis for hip preservation patients ranged from 17.2 to 61.5 months across studies. Prior healthcare providers consulted were largely other orthopaedic surgeons and primary care physicians; each patient consulted with an average of 1.9 to 4.2 providers and received a multitude of alternate diagnoses, imaging, and treatment attempts before presentation to a hip preservation specialist. Of the studies comparing outcomes between patients with short- and long-duration of symptoms (i.e. less than or greater than 2 years), there were significantly worse postoperative PROs in groups with a longer symptom duration.

**DISCUSSION AND CONCLUSION:** Patients presenting with hip preservation pathologies commonly experience delays in diagnosis and/or treatment, and consult with multiple healthcare providers across specialties before receiving an accurate diagnosis and appropriate treatment. In turn, this leads to poorer post-treatment outcomes compared to patients who receive appropriate treatment in a timely manner.