

Expectations of recovery following total hip arthroplasty: Patients expect less pain with the direct anterior approach

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INTRODUCTION: Use of the direct anterior approach (DAA) for total hip arthroplasty (THA) continues to grow, and patient preferences have evolved over time. The aims of this study were to determine whether pre-operative expectations of post-operative functional recovery differ between patients preferring the DAA THA versus those not preferring DAA.

METHODS: From 2024-2025, 225 patients (63% female, mean age 68 years) presenting for consultation for primary THA were prospectively recruited. Four surgeons who perform both DAA and posterior approach participated. Patients self-identified as DAA-preferring or non-DAA preferring (no preference or preferring an alternative approach). Expectations were assessed using the Hospital for Special Surgery Hip Replacement Expectations Survey and an open-ended question about rationale for approach preference. Fisher's exact test was used for categorical data, Welch t-test was used for continuous data, and Wilcoxon rank sum test was used for data not normally distributed.

RESULTS:

Ninety-seven patients (43%) preferred DAA. Of the remaining 128 patients (57%), 113 had no preference and 15 preferred the posterior approach. The DAA-preferring group was older, included more women, and had a lower BMI ($p < 0.05$) (Table 1). The HSS Expectation Scores did not differ significantly between groups (Table 1). The DAA-preferring patients expected to not need pain medication more often than the non-DAA preferring group (77% vs 65%).

The DAA-preferring patients often cited "easier/faster recovery," "less invasive," and "better outcomes", and described the approach as "more modern or technically simpler." In contrast, patients in the non-DAA group were more likely to defer to their surgeon.

DISCUSSION AND CONCLUSION:

Patients seeking elective THA most commonly preferred the DAA (43%). This group had a significantly lower BMI and expected both less pain and to need less pain medication postoperatively. These findings can help surgeons counsel patients pre-operatively depending on their preexisting preferences for surgical approach.