

Most Hip Arthroscopy Patients Report Resolution of Mechanical Symptoms at Two Year Follow-up

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INTRODUCTION: Mechanical symptoms are common concerns for patients prior to hip arthroscopy.

The purpose of this study was to evaluate the rate at which mechanical symptoms such as catching, locking, giving out, and stiffness resolve after primary hip arthroscopy for patients with labral tears secondary to femoroacetabular impingement.

METHODS: Two-year follow-up data was collected from 235 patients who underwent hip arthroscopy. Patients reported occurrences of mechanical symptoms including catching/locking, giving out, or stiffness preoperatively and at 3-, 6-, 12-, and 24-months postoperatively. Postoperative symptom resolution was calculated, along with t-tests and chi-squared tests to compare continuous and categorical variables respectively. Changes in Non-Arthritic Hip Scores (NAHS) subscales such as pain, symptoms, physical function, and sports were compared between groups using t-tests.

RESULTS: Of the 235 patients included in this study, at baseline 155, 88, and 202 patients experienced some catching/locking, giving out, or stiffness respectively. Postoperative complete symptom resolution at 2-years was highest for the hip giving out (88.6%), then catching/locking (63.8%), then stiffness (32.0%). Body mass index (BMI) and Tönnis angle were significantly lower for patients whose symptoms resolved than those whose symptoms were unresolved for at least one patient-reported mechanical symptom ($P < .05$). For all NAHS subscores patients with resolved mechanical symptoms at 2-years scored had significantly improved outcomes than those whose symptoms did not resolve.

DISCUSSION AND CONCLUSION:

For the majority of hip arthroscopy patients, the hip giving out or catching/locking is likely to resolve. However, some stiffness is more likely to remain unresolved. Improved NAHS subscores suggest symptom resolution could contribute to superior functional outcomes.