## No Difference in Revision Rate between low Viscosity and high Viscosity Cement used in primary Total Knee Arthroplasty

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Loosening remains one of the most common reasons for revision total knee arthroplasty (TKA). Cement viscosity has a potential role in reducing revision rates for loosening. The aim of this study was to assess the outcome for loosening of the 5 most used cemented knee prostheses by constraint type, based on the cement viscosity type used. METHODS:

There were 214,708 TKA procedures performed between 1999 and 2020 for a diagnosis of osteoarthritis using the 5 most commonly used minimally stabilized, posterior stabilized and medial pivot design cemented tibial components. Only procedures with a cemented tibial component were included. Outcomes for two different cement viscosities, 140,060 high viscosity and 74,648 low viscosity cement were compared for each fixation type within each of the three stability types. RESULTS:

There was no difference in risk of all-cause revision when high viscosity cement was compared to low viscosity cement for minimally stabilized prostheses (HR 1.07 [95% CI 0.99-1.15], p=0.09), Fig. 1, posterior stabilized prostheses (HR 1.03 [95% CI 0.95-1.11], p=0.53), Fig. 2 and medial pivot design prostheses (HR 1.06 [95% CI 0.80-1.41], p=0.67), Fig. 3. No difference was observed between cement viscosity type for any of the prosthesis constraint types when aseptic loosening was assessed.

## DISCUSSION AND CONCLUSION:

We found no difference in the risk of revision for any reason, or for loosening, with cement viscosity for the most commonly used minimally stabilized, posterior stabilized and medial pivot total knee arthroplasty. The role of cement viscosity in the risk of TKA revision remains unclear and further research is required.

