

REVISION SURGERIES IN DDH : OUR EXPERIENCE

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INTRODUCTION AND AIM

DDH can be successfully treated by open reduction, but we still see failure of open reduction in some of the cases. In this study we aim to evaluate and to identify the causes of failure of primary open reduction and determine the outcome of revision surgery in DDH.

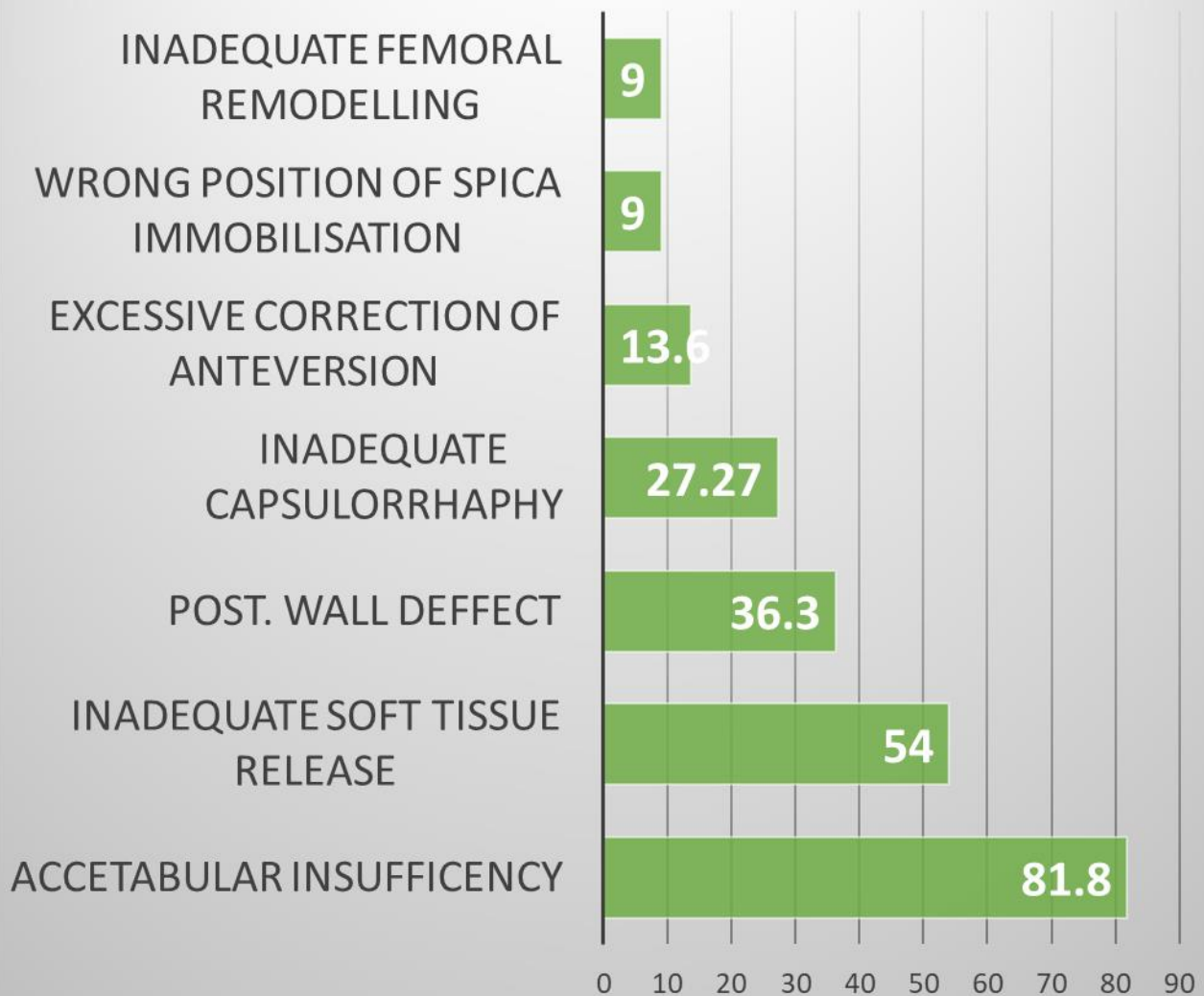
MATERIAL AND METHODS

We identified patients who underwent revision surgery for DDH following primary open reduction done at our centre or referred from other hospitals. The patients were assessed for the cause of failure of primary surgery by clinical examination, radiological investigations and intraoperative assessment. The patients who underwent revision surgeries were followed up to assess the clinical and radiographic outcomes with McKay criteria and Severin classification respectively.

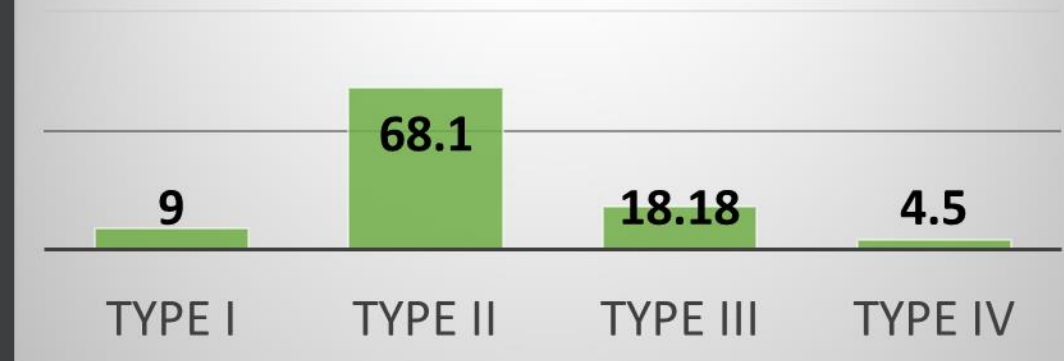
RESULTS

- ❖ 22 patients with mean age at the time of revision surgery 6.5years.
- ❖ **PROCEDURE DONE** : revision open reduction with adequate soft tissue release & capsulorrhaphy +/- VDRO/ pelvic osteotomy [81 % patients]
- ❖ At 12 months clinically as per McKay criteria all patients except three had excellent to good results. Radiologically three had Severin class 4 outcome. Two patients developed AVN. One had re-dislocation
- ❖ **There was significant improvement of acetabular index and ADR in all patients.**

CAUSES FOR FAILURE



SEVERINS CLASSIFICATION

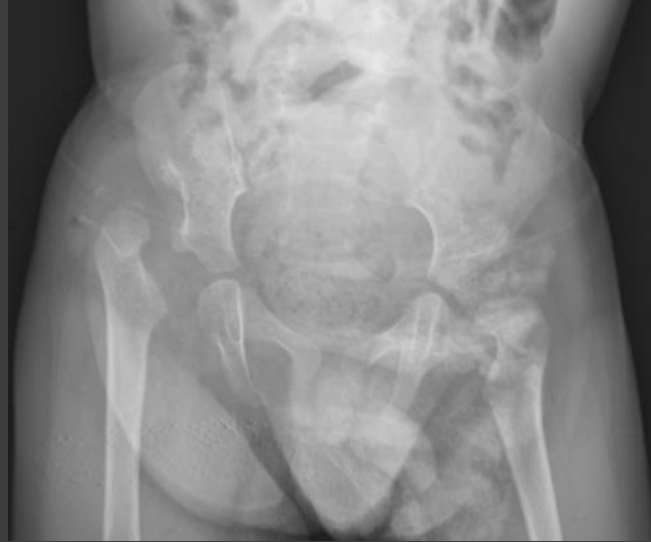


	ACCETABULAR INDEX	ACCETABULAR DEPTH RATIO
PRE-OP	51.4	210
POST REVISION	26.6	390

PRE-OP



AT PRESENTATION



1 WEEK POST OR



1 YEAR POST-OP



6 MONTHS POST REVISION



DISCUSSION

- ❖ It is difficult to obtain excellent results by secondary open reduction of DDH.
- ❖ Causes for Failure of primary surgery can be
 - ✓ **IMMEDIATE** :approach related , Technical errors –Inadequate soft tissue release
 - ✓ **DELAYED**: Inadequate capsulorhaphy, faulty Spica application, Inadequate stabilization, Acetabular insufficiency
 - ✓ **LATE** : Failure of/ abnormal Acetabular and femoral remodeling
- ❖ Peri and post-operative complications , unexpected findings are more common in revision surgeries.
- ❖ Revision surgery for DDH can always improve functions, but may not result in a normal hip joint.

CONCLUSION

We found that the main cause of failure of primary surgery was **inadequate soft tissue release, insufficiency of acetabulum and improper position/ duration of immobilization with Spica cast**. Careful assessment and proper techniques can prevent such failures. The outcome of revision surgery of DDH has good results if identified and intervened at early age.