



Sports Medicine Roadshow 2019

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Management of FAI

What the research has to say

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The Hip and Groin Clinic

UPMC Whitfield Hospital

Evidence-based research

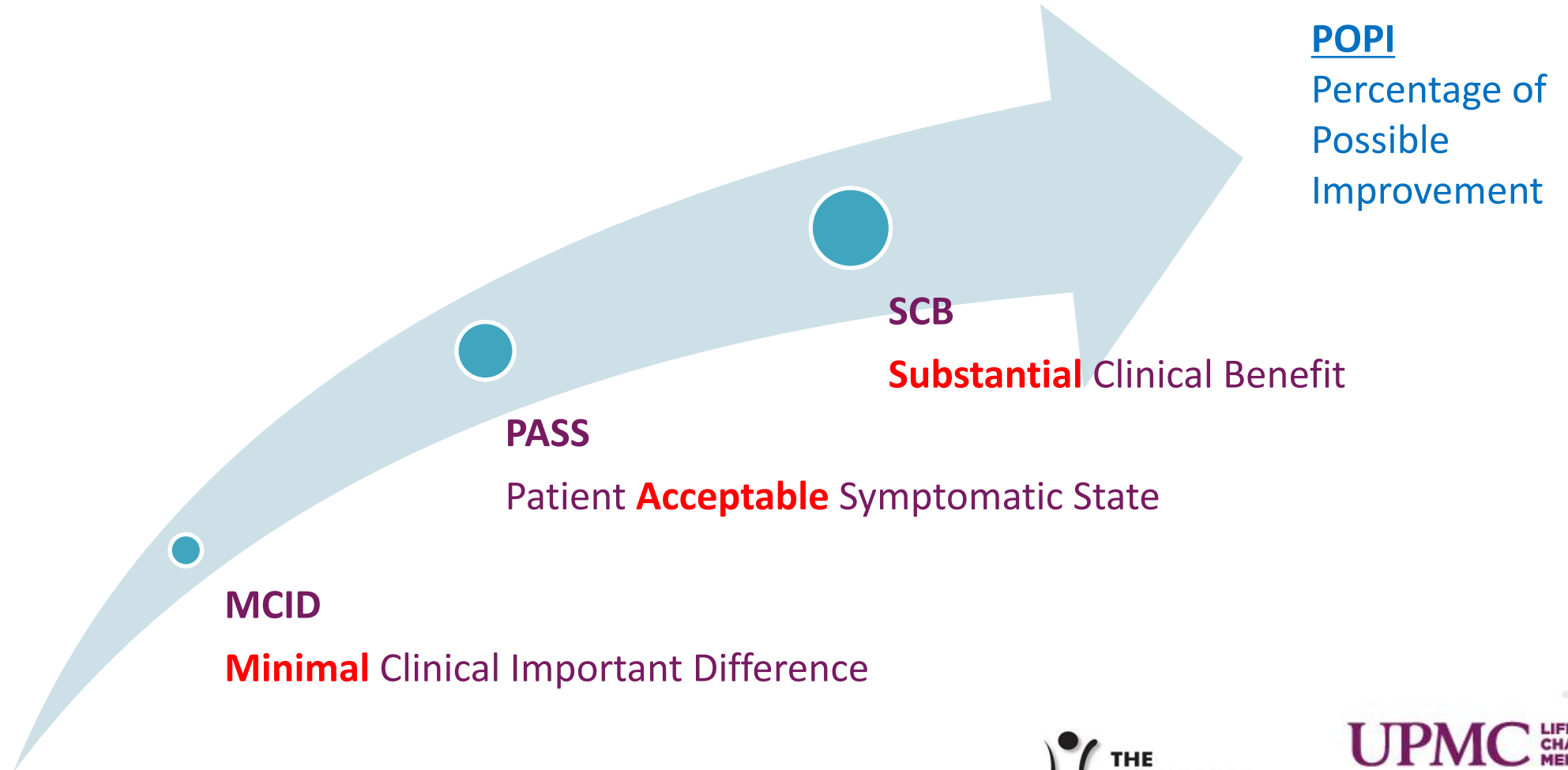


Outcomes, Outcomes, Outcomes

- PROMs
 - Harris Hip Score
 - WOMAC
 - SF-36
 - UCLA Activity Scale
- Patient's subjective report
- RTP
- Survivorship



How Good is Good?



Surgical

Non-surgical

One-off event
Recruiting & Retaining
Crossover



RCTs

- Basis for treatment is from empirical evidence
- Determine the comparative effectiveness of surgery and physical therapy for FAI

Arthroscopic Surgery or Physical Therapy for Patients With Femoroacetabular Impingement Syndrome

A Randomized Controlled Trial With 2-Year Follow-up

Conclusion: No difference between groups

- 70% crossover from PT to Surgery
 - CEMB – 20% may invalidate results
- Group sizes uneven
 - (66 Sx group vs 14 Cx group)
- Symptom chronicity
 - 61.2% Sx group vs 14.3% Cx group symptoms >2 years
- PROM improvements overall are low

Arthroscopic hip surgery compared with physiotherapy and activity modification for the treatment of symptomatic femoroacetabular impingement: multicentre randomised controlled trial

Conclusion: Patients with symptomatic FAI achieve superior outcomes with HA compared to physiotherapy/activity modification

- Short follow-up (6 months)
- No quantitative imaging measurements used
- 94% isolated cam – results may not apply to mixed/pincer FAI

Hip arthroscopy versus best conservative care for the treatment of femoroacetabular impingement syndrome (UK FASHIoN): a multicentre randomised controlled trial

*Damian R Griffin, Edward J Dickenson, Peter D H Wall, Felix Achana, Jenny L Donovan, James Griffin, Rachel Hobson, Charles E Hutchinson, Marcus Jepson, Nick R Parsons, Stavros Petrou, Alba Realpe, Joanna Smith, Nadine E Foster, on behalf of the UK FASHIoN Study Group**

Conclusion: Both improved hip-related quality of life; hip arthroscopy led to a greater improvement than personalized hip therapy

- Multi-center (n=23), multi-surgeon (n=27) trial
- Short follow-up (12 months post-randomization)
- 2-year results (ISHA 2019 meeting)
 - Bigger gap (decline in personalized therapy scores)
 - Crossover ~23%



- Still much to be learned about the indications for optimal management of FAI
- RCTs to date are low quality for both surgery and physiotherapy – crossover particularly problematic
- Appropriate role for both management techniques in the appropriate patient
- Understanding how an intervention works is key



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Consensus
|
Validated physiotherapy
protocol
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Outcomes

References

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Thank You





SPORTS MEDICINE ROADSHOW

River Lee Hotel, Cork

02nd November 2019