

# REDAPT° Revision Femoral Stem subsidence is typically minimal (<5mm) and stabilises within the first 3 months of revision total hip arthroplasty (rTHA)

There were no cases of subsidence >10mm or revision due to subsidence through at least 1 year of follow-up



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### Study overview

- A multicentre, retrospective study of 111 rTHAs using REDAPT Revision Femoral Stems in 108 patients
- Post-operative radiographs were evaluated for quantitative evidence of femoral stem subsidence for at least 1 year of follow-up
- · Safety data and the occurrence of re-revision were also reported

## Key results

- Stable fixation with subsidence <5mm was achieved within 3 months in ~90% of patients (Figure)
  - 10/111 stems (9.2%) showed radiographic subsidence >5mm within 1 year
  - All patients achieved stable fixation on last follow-up evaluation
  - No subsidence >10mm and no revisions for subsidence
- Few complications were reported:
  - 1 intra-operative complication (sciatic nerve injury)
  - No periprosthetic fractures
  - 30- and 90-day readmission rates of 13.6% and 12.6%, respectively
  - 1 femoral stem revision due to periprosthetic joint infection



Figure. Key results for subsidence with REDAPT Revision Femoral Stem after rTHA.

### Conclusion

Femoral subsidence with REDAPT Revision Femoral Stem was minimal (typically <5mm) and stabilised within 3 months of rTHA in the vast majority of patients. There was no subsidence >10mm and no stems required revision due to subsidence at latest follow-up. The authors conclude that nonmodular stems, for example REDAPT Revision Femoral Stem, are promising alternatives to modular femoral stems.



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## Study citation

\*Gabor JA, Feng JE, Anoushiravani AA, et al. Short-term outcomes with a monolithic, tapered, fluted, grit-blasted, forged titanium revision femoral stem. Presented at: 13<sup>th</sup> Congress of the European Hip Society (EHS); September 20–22, 2018; The Hague, Netherlands.