Rapidly Progressive Osteoarthritis after Arthroscopic Labral Repair for Dysplasia

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• Recent reports of poor clinical outcomes after arthroscopic surgery in hips with marked dysplasia have emerged. Arthroscopic resection of the hypertrophic labrum of dysplasia, especially in the absence of peri-acetabular osteotomy (PAO), has been implicated. As a major open procedure, some patients will refuse PAO, opting for a less invasive arthroscopic procedure. We present 2 young adult patients with marked dysplasia, who suffered rapidly progressive osteoarthritis despite arthroscopic labral repair.
Case 1

29 yo woman with CEA 10 degrees refused offered PAO and underwent arthroscopic labral repair plus cam decompression and progressed to rapidly progressive osteoarthritis within 7 months
Case 2

31 yo woman with CEA 11 degrees opted for arthroscopic labral repair over PAO with rapidly progressive osteoarthritis requiring total hip arthroplasty within 12 months
• Although perhaps beneficial as an isolated procedure in borderline or mild dysplasia, arthroscopic hip surgery, even labral repair, may best be performed with PAO in more severe dysplasia. Albeit attractive as a less invasive labral preserving surgery, arthroscopic labral repair may not only fail to provide symptomatic improvement, but may compromise or preclude a later PAO if rapidly progressive osteoarthritis ensues. Hip arthroscopy may best be performed concurrently or following but not proceeding PAO in patients requiring the both procedures.


