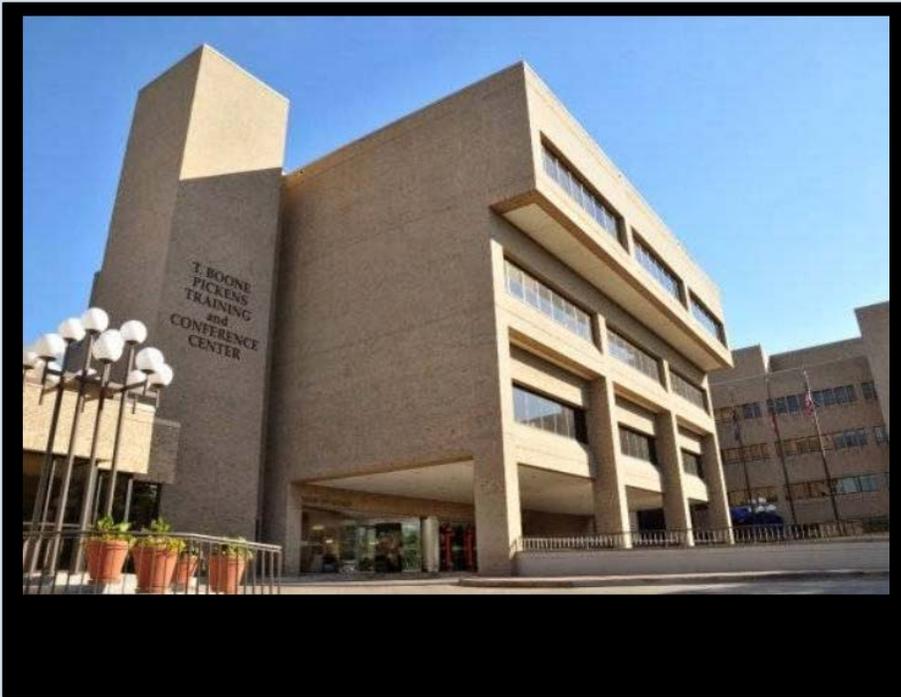




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2018 Annual ANCHOR Meeting

Held on November 8th and 9th at the

T. Boone Pickens Training and Conference Center at Texas Scottish Rite Children's Hospital



Attendees at the 2018 Annual ANCHOR Meeting



Daniel Sucato M.D., M.S.
Chief of Staff – TSRH

On November 8th and 9th, 2018 the **Academic Network of Conservational Hip Outcomes Research (ANCHOR)** surgeons convened their annual meeting at Texas Scottish Rite Hospital for Children to discuss their past, present, and future clinical outcomes research and studies aimed to improve patient care, diagnosis, and treatment of adolescent and young adult patients with pre-arthritis disease like femoroacetabular impingement (FAI) and dysplasia. On behalf of the entire ANCHOR GROUP, we wish to express our sincere gratitude and appreciation to **Dr. Daniel Sucato** and his team for hosting such a successful meeting.





ANCHOR is a multicenter clinical research group investigating adolescent and adult hip disorders. We are focused on improving patient care through research, education and mentorship.



During the recent, annual meeting, we set goals for the coming year. One important goal is our launch of an exciting new research project regarding:

Femoroacetabular Impingement (FAI) & Borderline Developmental Dysplasia of the Hip (DDH)

This project will enroll research participants at each of our 17 ANCHOR centers. The project outlines a strategy to investigate the most important predictors of FAI treatment outcomes. The work will provide novel findings to improve patient selection for surgery and refine future surgical treatments of FAI.

FAI is a complex pre-arthritis hip disorder that has come to the forefront as the most common cause of hip dysfunction in young individuals 15-40 years of age and hip osteoarthritis (OA) in patients over 40 years of age. Current treatment of hip OA is estimated to account for over 15 billion dollars of healthcare costs in the United States alone, including over



750,000 total hip replacements annually. FAI results from structural deformities of the acetabulum and femur that produce repetitive abutment (“impingement”), progressive joint degeneration and development of secondary osteoarthritis over time.

FAI is currently the focus of intense interest directed at surgical treatment in young patients to relieve pain, enhance function and potentially delay or prevent OA.

Despite the surge in diagnosis and enthusiasm for surgical interventions, there is a scarcity of clinical evidence to guide treatment. Early studies on FAI suggest significant improvements (above the minimal clinically important difference) occur in only 70-80% of patients. This highlights the need for identification of patient, disease, and treatment-specific characteristics to enhance the outcomes of surgical treatment.

A multicenter, prospective cohort study of the treatment of FAI is well-suited for this purpose. This study will attempt to advance our understanding of outcomes of surgical treatment of FAI.



We are proud to announce the launch of our new

ANCHOR GROUP website:

<https://www.anchorhipsurgeons.com/>

Please visit often for the latest and featured news and to subscribe to future newsletters.



Academic Network of Conservational Hip Outcomes Research
<https://www.anchorhipsurgeons.com>



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OXFORD



Trends of hip arthroscopy in the setting of acetabular dysplasia

Jacob A. Haynes¹, Cecilia Pascual-Garrido², Tonya W. An³, Jeffrey J. Nepple², ANCHOR Group² and John C. Clohisy^{2*}

Hip arthroscopy is increasingly utilized in the treatment of symptomatic intra-articular hip pathology. Unaddressed development dysplasia of the hip (DDH) is thought to be associated with failure after hip arthroscopy. The aims of this study were (i) to identify the prevalence of previous failed hip arthroscopy in patients undergoing a periacetabular osteotomy (PAO) for the treatment of symptomatic acetabular dysplasia, (ii) report on the temporal trend of failed ipsilateral hip arthroscopy in patients undergoing PAO and (iii) to determine clinical and radiographic characteristics associated with utilization of isolated hip arthroscopy in patients with acetabular dysplasia. We identified 139 patients undergoing PAO who had a history of a prior ipsilateral hip arthroscopy.

A comparison group of 1505 patients with a diagnosis of acetabular dysplasia, who underwent PAO alone without any prior ipsilateral surgery during the study period was used. Clinical characteristics, radiographic and intraoperative findings were compared between cohorts. From 2008 to 2015, the rate of previous failed hip arthroscopy in patients undergoing subsequent PAO increased steadily until 2013 with a maximum of 12%. Patients in the study group had mild dysplasia with significantly higher LCEA (17.2_ versus 11.3_ ; $P < 0.001$) and ACEA (15.6_ versus 10.8_ ; $P < 0.001$), a lower acetabular inclination (14.0_ versus 19.0_ ; $P < 0.001$).

The findings illustrate a constant increase in the rate of failed hip arthroscopy in the setting of acetabular dysplasia from 2008 till 2013. Female sex and mild dysplasia were associated with use of isolated hip arthroscopy in the setting of acetabular dysplasia.

Dr. Jeffrey Nepple discussing the 2019 launch of ANCHOR's new FAI-2 study



From left to right:
Dr. Yen, Dr. Pascual-Garrido, and Dr. Ellis

