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IS BILATERAL TOTAL HIP REPLACEMENT SAFE IN OLDER PATIENTS?

Background: Despite the potential benefits of bilateral total hip arthroplasty (BTHA), it remains unclear if the procedure is safe for elderly patients. The purpose of this study was to compare early post-operative complications between unilateral THA and BTHA performed in patients younger and older than 70.

Methods: Prospective data was collected for 315 patients who had undergone THA (≤ 70 , N=143; >70 : N= 103) or single-stage BTHA (≤ 70 : N=46; >70 : N=23) by a single, fellowship trained surgeon. Variables of interest included transfusion rate, length of stay, pre- and six-week post-THA Hip Disability and Osteoarthritis Outcome Score (HOOS JR), and 90-day complications and readmissions.

Results: Compared to THA >70 patients, BTHA >70 patients remained at the hospital longer (0.9 days vs 2.2 days, respectively) and were less likely to be discharged directly home (85% vs 74%, respectively). Transfusion requirement was not significantly different between BTHA >70 (13%) and BTHA ≤ 70 (4.3%). The complication rate in BTHA >70 (4.3%) was similar to that of THA >70 (4.9%) and BTHA ≤ 70 (2.2%). The lone readmission in the BTHA >70 group was due to a component dislocation requiring revision but no cases of pulmonary embolism or deep vein thrombosis were reported. There were no differences in pre- or post-THA satisfaction or HOOS JR scores.

Conclusion: Although BTHA >70 patients were most likely to require transfusion, this cohort demonstrated comparable complication rates and patient reported outcomes as THA >70 and BTHA ≤ 70 patients. These data suggest BTHA may be a reasonably safe treatment option for patients >70 with symptomatic bilateral hip osteoarthritis.

Keywords: Total hip arthroplasty, elderly, bilateral, single-staged, simultaneous