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Description:

The presenters in this session, Orthopaedics surgeons and physical therapists from Hospital for Special Surgery, an Orthopaedics specialty hospital in New York City, will discuss how advances in surgical techniques and rehabilitation protocols are reducing recovery times of patients after total hip arthroplasty (THA). These advances can maximize value for a growing patient population, while addressing payment constraints such as comprehensive joint replacement bundles. Additionally, a hotly debated topic in the world of joint arthroplasty is whether the surgical approach has an effect on recovery. The pros and cons of the posterior versus anterior approach will be reviewed. The presenters will also explore when and if hip precautions are truly indicated in postoperative recovery. Lecture, video, case studies, and active debate will help participants consider whether it is the surgical approach, precautions, or the rehabilitation protocol that makes the difference in rapid recovery.

Learning Objectives:

1. Review the influence of surgical approach on outcomes
2. Understand the evolution and variability of hip precautions
3. Explain the changing role of rehab in peri-operative THA recovery
4. Discuss the move towards ambulatory THA
5. Review relevant post-operative findings
6. Challenge the status quo and make you think!

Course Outline:

Epidemiology of THA (Erica/Allie)

Then & Now (Erica/Allie)
- THA in 2000
- THA in 2019

Surgical Approach to THA
- Does the approach make a difference in recovery?
  - History of anterior (Dr. Ast) and posterior (Dr. Sculco) approaches to THA
  - Differences between exposures during each approach (Dr. Sculco & Dr. Ast)
  - Comparison of the two approaches (Dr. Sculco)

Protocol
- Does protocol make the difference in recovery?
  - Prehab Variations (Erica)
    - Prehab – review the literature on types of prehab for THA and effectiveness
    - Pre-op Education
      - PT’s role in pre-op education at HSS
      - Discuss patient discharge disposition
Begin tracking pre-op outcome measures: TUG, HOOS JR, 30 sec sit to stand
- Suggest ideas on how we can implement similar strategies across the profession
  - Multimodal perioperative management (Dr. Ast)
  - Inpatient post-operative PT protocol (Allie)
    - Are there modifications to PT protocol based on surgical approach or precautions, and if so does this impact patient progression?
    - Pathways (ambulatory, “fast track”, standard, complex)

- Post-hospital PT protocol & discharge plan home
  - Telehealth – “deliver appropriate care at the appropriate time for the appropriate patient” (Allie)
  - Outpatient (Erica)
    - Phases of recovery and common treatments
      - Common patient presentations
      - Review guidelines and clinical treatment pearls
        - PT’s role is moving towards keeping patients from “overdoing it”
        - When is it appropriate to discharge patients from PT?
        - Return to sport (Erica, Dr. Sculco, Dr. Ast)

Precautions (Dr. Sculco & Erica)
- Do precautions (or lack thereof) make a difference in recovery?
  - Review of the research
- Discussion of dislocation rates across all of THA
  - Origin of precautions and their evolution over time
- Who are the “high risk” patients?

Case Studies – What should we as PT’s be on the lookout for? What is concerning and what is normal?
- “Is this wound normal?”
- “I was doing so well but now it hurts”
- “My leg is longer”
- “Do I have a blood clot?”
References