

Nonmodular stems demonstrate similar clinical outcomes to modular stems

Nonmodular stems may provide improved value compared to modular stems



Study overview

- Single-centre, retrospective review of all revision total hip arthroplasties (rTHA) using modular or nonmodular revision implants between 1 January 2013 and 30 September 2017
- 146 rTHAs met the inclusion criteria:
 - Nonmodular: 43
 - Modular: 103
- Paprosky classification of bone loss and clinical outcomes (revision and reoperation rates and post-operative complications) were analyzed



Key results

- Nonmodular stems faced a larger percentage of Type IIIA and IIIB Paprosky defects compared to the modular group (Figure)
- Similar differences in the rates of re-revision of femoral implants, reoperation or post-operative complications were observed between modular and nonmodular femoral implant groups
- At this centre, nonmodular femoral implants were associated with a lower cost than modular femoral implants

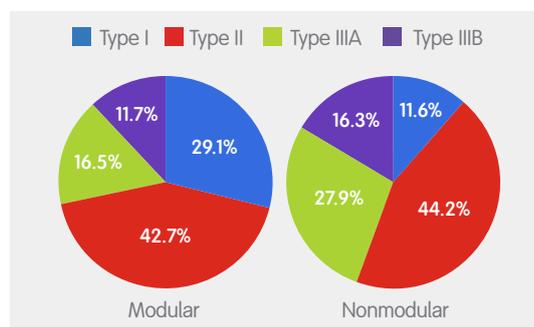


Figure. Paprosky classification of all rTHAs in the modular and nonmodular femoral implant groups (%)



Conclusion

Despite facing a higher percentage of larger Paprosky defects, nonmodular femoral implants demonstrated similar clinical outcomes to modular femoral implants, and were associated with a lower cost. Use of nonmodular femoral implants may provide improved value, compared to using modular femoral implants, without sacrificing quality.



Study citation

*Clair AJ, Cizmic Z, Vigdorichik J, et al. Nonmodular stems are a viable alternative to modular stems in revision total hip arthroplasty. Poster presented at: 13th Congress of the European Hip Society (EHS); September 20-22, 2018; The Hague, Netherlands.