The Effect Retroverted Stems have on Hip Range-of-Motion to Impingement and Combined Anteversion



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INTRODUCTION

Studies have shown that femoral stem torsion can vary from 19° retroversion to 33° anteversion (20/60 femurs having retroverted nocks)1

FIGURE 2

ROM to Impingement for Retroverted Stems Dual-Mobility Liner 90° Femoral Flexion with 40° IR and 20° Posterior Pelvic Tilt

necks)¹

 The purpose of this study was to show the effects that retroverted stems have on hip range-of-motion (ROM) to impingement and combined anteversion (CA).

METHODS

- A validated hip ROM 3D simulator was utilized.
- The user imported a CT (supine and standing pelvic tilt (PT) =0) and set the femoral flexion at 90° with 40° IR and pelvis with a 20° seated posterior PT.
- The following implant models were used: tapered wedge stem with 132° neck angle, and both 36mm and Dual-Mobility liners.
- The femoral stems were tested at retroverted values of -5°, -10°, -15°, and -20°.
- Combinations of cup inclination and version were found that brought on the onset of stem-to-liner impingement.



Using a Dual-Mobility liner gained back 4°- 5° of version.



 ROM-to-impingement curves were generated and compared to the Lewinnek Safe Zone (LSZ) version range of 15°±10°, and Dorr combined anteversion acceptance range of 25 to 50.

RESULTS

- The ROM-to-impingement curves varied with different retroverted stem values.
- The -5° stem with 36mm liner produced a downward sloping curve (Left-to-Right) that crossed over the 40°/20° cup position.
- All combinations of cup inclination and version below this curve resulted in impingement. Other curves were above and parallel
- In general, for each 5° of stem retroversion, an extra 4.3° of cup version was required to avoid impingement.

No retroverted stem satisfied both the LSZ and Dorr criteria at the same time.

CONCLUSIONS

- Retroverted stems require high cup version angles to avoid impingement.
- Retroverted stems will not satisfy both the LSZ and Dorr criteria at the same time.
- Based on our results, using dual-Mobility cups may help to avoid impingement.



ROM to Impingement for Retroverted Stems 36mm Liner 90° Femoral Flexion with 40° IR and 20° Posterior Pelvic Tilt



REFERENCES

 Ernst Sendtner, Schuster Tibor, Roman Winkler, Michael Wörner, Joachim Grifka & Tobias Renkawitz (2010) Stem torsion in total hip replacement, Acta Orthopaedica, 81:5, 579-582, DOI: 10.3109/17453674.2010.524596

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DISCLOSURES

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