



LABRAL TEARS AND FEMORAL VERSION DEFORMITY: IS DEROTATIONAL OSTEOTOMY ALONE SUFFICIENT?

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DISCLOSURE SLIDE

The author declares that she has no relevant or material financial interest that relate to the research in this presentation

PURPOSE

- Labral repair without addressing femoral version deformity is associated with high rates of failure.
- A combining a surgical approach to address the labrum and femoral version has more positive outcomes.
- It is unknown whether the labrum or femoral version is the cause of the symptoms.
- We are evaluating patient satisfaction scores and the rate of secondary surges for patients who have had a derotational osteotomy surgical procedure and have suffered a labrum tear.

HYPOTHESIS

- A minority of patients will require a repair of their labral tear after receiving a derotational osteotomy.



METHODS

- We retrospectively reviewed patients who underwent a percutaneous derotational osteotomy using a femoral nail who had a labral tear from 2021-2025.
- Inclusion criteria:
 - Completed at least 6 months of follow-up
 - Primary reason for surgery was hip pain
- Patients were queried on satisfaction with the procedure, need for additional procedures, and improvement of symptoms.
- Patient reported outcomes scores were recorded using the Harris Hip Score and PROMIS physical function.

RESULTS

- 20 patients were available for analysis.
- The average follow-up was 6 to 30 months.
- 90% of patient did not require further surgical intervention.
- Patients reported on average 80.6% (95% CI, 69.4-91.8%; range, 0-100%) of improvement of symptoms.
 - 20% of patients reporting complete resolution.
- The average hip score was 71.95 (range, 34-91) and PROMIS physical function 43.8 (range, 32-50).

How Many Patients Required Additional Surgery?

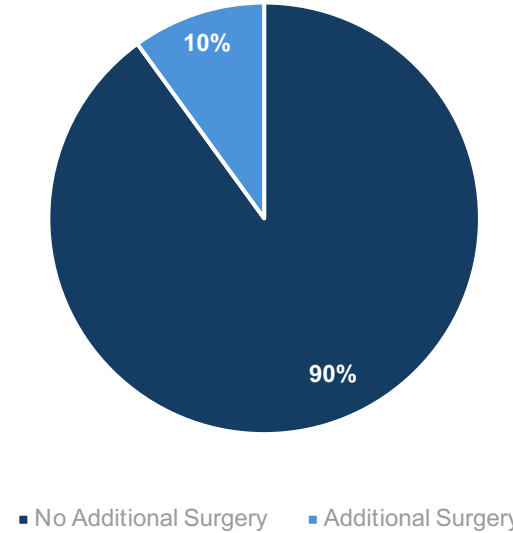


Figure 1: A pie chart depicting the percentage of patients requiring an additional surgery.

Average Patient Reported Outcome Scores	
Percentage of Symptom Relief	80.60%
Modified Harris Hip Score	71.95
PROMIS Physical Function - Short Form 10a	43.75

Figure 2: A table depicting the average patient reported outcomes for symptom relief, Harris Hip Score, and PROMIS physical function.

CONCLUSION

- The majority of patients with concomitant labral tears and femoral version abnormality do not require surgical fixation of their labral tear.
- A derotational osteotomy alone has sufficient symptomatic relief for both femoral version and a labral tear.
- Given these findings, staging correction of femoral deformity and repair of labral pathology in these patients will result in decreased need for an additional surgical intervention.

REFERENCES

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DISCUSSION

QUESTIONS?