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## Hip arthroplasty in metastatic bone disease of the hip-tertiary care center experience

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**Background & Aim:** Hip arthroplasty is the ideal management for metastatic bone disease affecting proximal femur and acetabulum. There are more intraoperative technical difficulties than regular primary hip hemiarthroplasty (HA) or total hip arthroplasty (THA). We are presenting the experience of a tertiary care center.

**Methodology:** We retrospectively recruited all arthroplasty cases for hip metastases from the period of October 2010 to September 2016. Exclusion criteria are: Pathologic fracture in metabolic or primary bone disease, no evidence of local hip metastasis and patients reconstructed using megaprosthesis. Chart review was done to collect data regarding preoperative demographics, operative surgical techniques and post-operative complications.

**Results:** 58 patients (59 hips) were included. The mean age at surgery was 69.09 years. 50% were male (29 patients). 85% of cases are reconstructed with HA and the other 15% had THA. Cementing of the stem was done in 76.6%. All cups of THA were cemented except one. Long stem prostheses were used when the subtrochanteric region is diseased (18.3%). Eight patients (13.5%) developed complications. Three cases (5%) had dislocations post operatively and 2 of them required surgery. Reoperation rate was 8.5%. Mean survival after surgery was 240 days.

**Conclusion:** Hip arthroplasty in metastatic bone disease is associated with high risk for perioperative complications (can reach 13.5% in less than a year post operatively). Understanding the bone and soft tissue deficiency is crucial to allow acceptable stable reconstruction. Hemiarthroplasty is an ideal option with acceptable dislocation rate in cases of normal acetabulum and sedentary oncology patients.

### Biography

Mohammed Al Sobeai has completed the Medical School from Dammam University in 2004. He has completed the Saudi Orthopedic Board in 2012 and Jordanian Board in Orthopedic Surgery in 2013. Currently, he is a Canadian Fellowship trained Orthopedic Oncologist and Lower Limb Reconstruction Specialist. He has published many orthopedic research projects and actively involved in literature review and editing.

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