

Correspondence

Substantially higher prevalence of postoperative periprosthetic fractures in octogenarians with hip fractures operated with a cemented, polished tapered stem rather than an anatomic stem: A prospective cohort study involving 979 hips (Acta Orthop 2016; 87(3): 257-61)

Sir,—We read with interest the paper by Mukka et al. (2016) concerning periprosthetic femoral fractures around a CPT versus SPII stem.

On page 257 the authors write “the SHAR does not capture patients treated with open reduction and internal fixation without exchange of the implant” referring to the annual report of SHAR (Swedish Hip Arthroplasty Register), 2014. At page 10–11 (English version) of this annual report we describe how many periprosthetic femoral fractures (PPFF) had not been registered to SHAR and analyze some characteristics of this patient category.

SHAR registers both primary hip arthroplasties and reoperations. Reoperation includes all kinds of surgical intervention that can be directly related to an inserted hip arthroplasty irrespective of whether the prosthesis or one of its parts has been exchanged, extracted or left untouched (page 51, annual report 2014, English version).

Periprosthetic fractures that are treated with open reduction and internal fixation without exchange of the implants have been reported to the SHAR since 1979 as reoperations and not as revisions. In an ongoing study we have found that a relatively great proportion of the unreported reoperations due to PPFF belong to this category.

Furthermore, on page 260 of the paper, Mukka et al. refer to the study of Thien et al. 2014 concerning the reporting of PPFF to the SHAR. Thien’s paper studies revisions due to PPFF based on the data from NARA (Nordic Arthroplasty Register Association) and not only from SHAR. All registries, except the SHAR, register only revisions and not all kinds of reoperations of hip arthroplasties.

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Sir,—Thank you for Letter with valuable comments. We notice the unclear formulations at page 257 and 260 and are aware that the SHAR registers both reoperations with and without change of components. Our main message was that a large share of the periprosthetic fractures are not registered as analyzed in the annual report and this was the reason for performing our study. We apologize if our formulations have raised concerns regarding the SHAR.

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Mukka S, Mellner C, Knutsson B, Sayed-Noor A, Sköldenberg O. Substantially higher prevalence of postoperative peri-prosthetic fractures in octogenarians with hip fractures operated with a cemented, polished tapered stem rather than an anatomic stem. Acta Orthop 2016; 87(3): 257-61.

Thien T M, Chatziagorou G, Garellick G, Furnes O, Havelin LI, Mäkelä K, Overgaard S, Pedersen A, Eskelinen A, Pulkkinen P, Kärrholm J. Periprosthetic femoral fracture within two years after total hip replacement: analysis of 437,629 operations in the nordic arthroplasty register association database. J Bone Joint Surg Am 2014; 96(19): e167