

## GUEST EDITOR EDITORIAL

# Editorial (ESSKA-SHPS supplement)

In a world of systematic reviews and prospective studies, a consecutive series of case reports seems out of time. Out of fashion. Evidence is made by rigorous studies on large patient populations. Yes, we know. Nevertheless, every day, orthopedic surgeons, all over the world, deal with single patients, single cases. Some of them are outliers. Cases that do not fall in specific categories and require out of box thinking. Patients that may present with unexpected or unpublished complications. These cannot be highlighted properly in a large cohort study. But equally important to identify and, above all, to be recognized and treated properly. On some occasions, pathology is bilateral and surgeons must face peculiarities and dilemmas that are rarely written in today's dogmatic literature. Finally, there are new techniques, ingenious, yet applied to very few patients, that must be shared between us, even if they have short follow-up. They use, sometimes, off-label medical devices, but with a strong end ethical rationale.

These are the reasons why we, as ESSKA Hip Arthroscopy Committee, decided to propose to ESSKA Board and JHPS Editor-in-Chief this heterogeneous, and somewhat provocative, group of papers. They embraced the idea with enthusiasm. This issue is, of course, dedicated to conservative hip surgery. How could it be different? At the same time, it comprehends different etiologies around the hip. From developmental to post-traumatic disorders and from degenerative to the consequences of avascular necrosis. All these unusual case reports aim to present not just the cases themselves but the thought process behind the proposed treatments. They have been selected between ESSKA Hip Arthroscopy Committee and all other ESSKA members. Our call for paper submissions to this special issue yielded an incredibly high response. It was not easy to choose only 8 papers between over 60 high-quality scientific articles being proposed for publication. This enthusiasm reinforced to us that we were on the right way.

You will read, we hope passionately, how arthroscopy can be used to treat certain fracture-dislocation of the hip with a full reconstruction of hip stabilizers [1]. Or how an anterior inferior iliac spine ossification may need an open

excision, and through which approach [2]. You will discover how is possible to perform an arthroscopic head reduction [3]. You will also read about a devastating complication, never clearly explained in literature, after what is considered today the limit of our open conservative surgery. A femoral head reduction osteotomy [4]. Simultaneously, bilateral reconstructive hip surgery utilized in two separate emblematic cases [5, 6]. Finally, the ingenious techniques. The ones that could potentially change our mind. Polyurethane to reconstruct the acetabular labrum? It would be fantastic. Let us see, or, better, let us read about it [7]. Os acetabuli and rim fracture are quite frequent in the professional life of every hip surgeon. We will let you decide on the usefulness of the new technique for their treatment proposed by Lund [8].

At the end of the day what really matters for the success of this publication is to share the hidden knowledge of our professional life and produce new ideas on how to improve the treatment of our patients. This knowledge comes, not infrequently, from specific cases. Cases that have left some marks. Cases that we shyly discuss in the sidelines of scientific meetings. Cases that may represent the beginning of a new way of thinking. It would be unfair not to publish them. At least this time.

We hope you will enjoy.

Best wishes.

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