Viscosupplementation is not an alternative to hip joint surgery in patients with severe hip osteoarthritis. Results of a « real life » clinical survey in 137 patients.

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Background
Osteoarthritis (OA) is the most common musculoskeletal condition and one of the major causes of disability in elderly. As a cause of disability affecting large joints, hip OA is second only to knee OA and its prevalence is estimated between 3 and 11 % in subjects aged over 35 years.

Objective
To compare the effectiveness of viscosupplementation (VS) in patients for whom VS was the last resort before total hip replacement and in those with a less severe symptomatology, irrespective to the radiological grade of the disease.

Methods
137 patients who have been referred to a rheumatologist for symptomatic hip OA who received a single injection of HANOX M-XL into the hip joint within the 6 previous months contacted by phone and interviewed using a 10 item standardized questionnaire:
- Demographic data
- Analgesic or NSAIDs consumption
- Imaging guidance (fluoroscopy, ultrasonography or no guidance)
- Pain on a 10 point Likert scale (LS)
- Patient's self-evaluation of efficacy using a 4 point LS
- Patient’s self-evaluation of satisfaction with the treatment (4 pt LS)
- Tolerability (4 pt LS)

Depending on the answer to the question:

Patients were classified into two groups:
- THA group: consisted of patients for whom the viscosupplementation was the last resort before total hip arthroplasty.
- No Surgery NS group: consisted of those who would not consider surgery in the short term.

Results
- Sex ratio M/F = 57/80
- Mean age (SD) = 63.9 (10.5)
- Average follow-up = 11 (5.6) weeks
- Analgesics and/or NSAIDs regular users = 64%
- Intra-articular injection was performed:
  - under fluoroscopic guidance in 116 cases,
  - ultrasonography in 17 cases
  - without any imaging guidance in 4 cases.

Conclusion 1
- The present survey showed that 3 months after a single injection of HANOX M-XL, in the target hip, more than 1 patient out of 2 was satisfied with the treatment, with no particular or unexpected safety concern.
- The proportion of satisfied patients reached 88% in subjects with moderate disease, while it was only of 15.3% in those waiting for hip replacement.

Conclusion 2
- These data suggest that HANOX M-XL is a safe and efficient intra-articular treatment for hip OA but must not be considered as an alternative to surgery in advanced disease.