

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 cause of disablement 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 :

"Before viscosupplementation, was the decision taken, to have surgery in case of treatment failure?"

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.

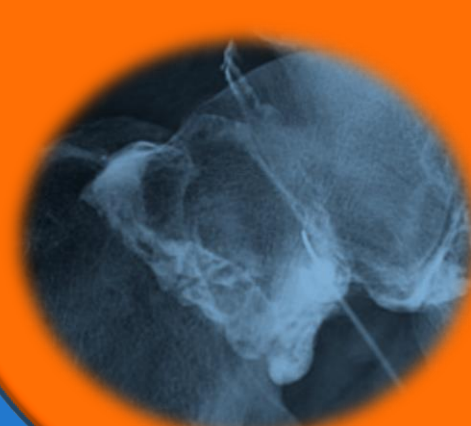
Treatment

HANOX-M-XL (HappyCross®, Laboratoire LABRHA, Lyon, France) is a novel viscosupplement, specifically designed to treat hip OA, that combines:

- a **high concentration** (15.5 g/L) of a **high MW sodium hyaluronate** of non-animal origin
- an **original cross-linking** mixing both medium (1.2mDa) and high (3 mDa) MW-HA, cross-linked independently (IPN®-like technology)
- a **high concentration** (3.5%) of **mannitol**, a polyol known for its antioxidant properties by scavenging radical oxygen species (ROS)
- a **2.2 mL volume**, well adapted to the hip joint size

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

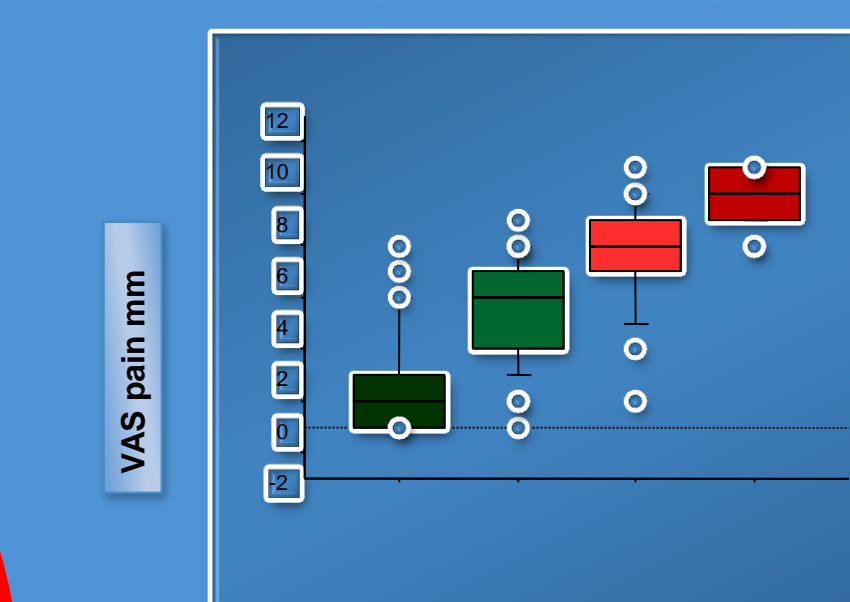
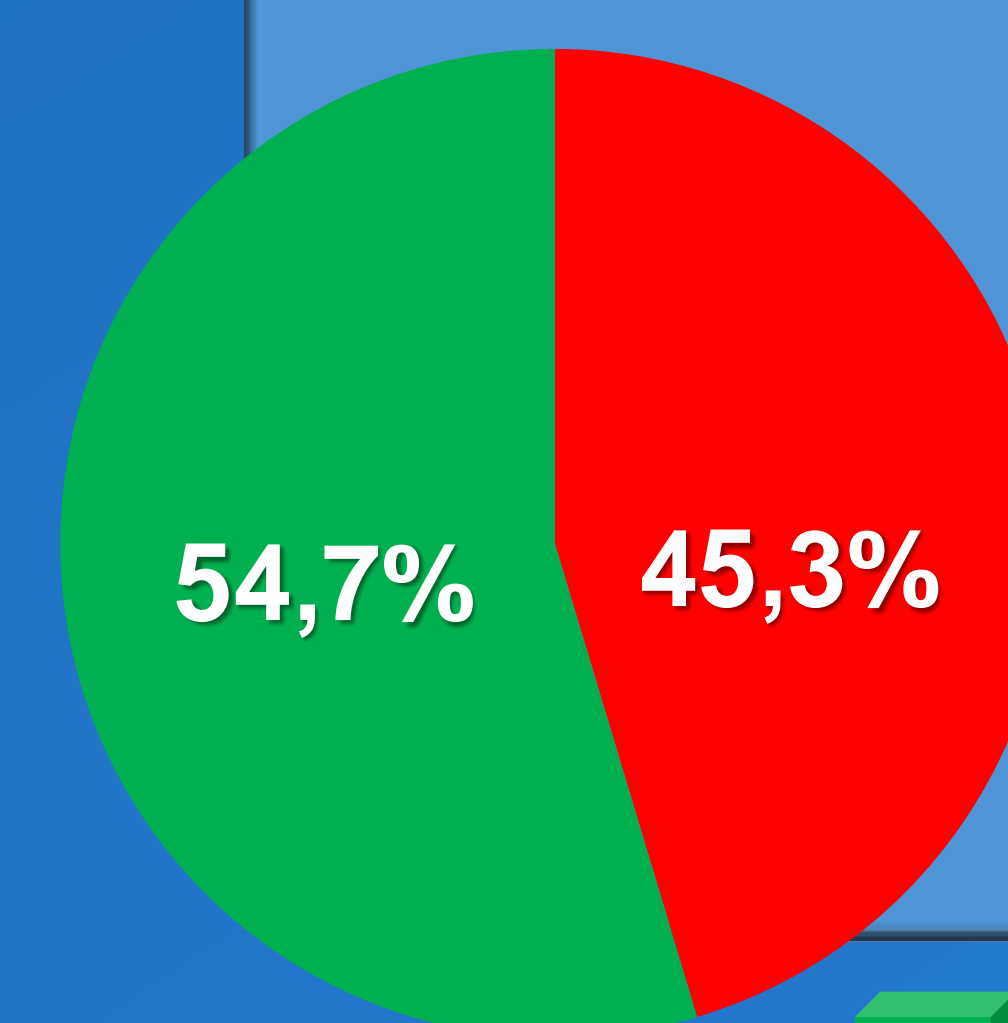
- The present survey showed that 3 months after a single injection of **HANOX M-XL** in the target hip, **more than 1 patient out of 2 was satisfied** with the treatment, with no particular or unexpected safety concern.
- The proportion of satisfied patients reached **66% in subjects with moderate disease**, while it was only of **15.5% 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 to be considered as an alternative to surgery in advanced disease.**

Total population (N=137)

Satisfaction

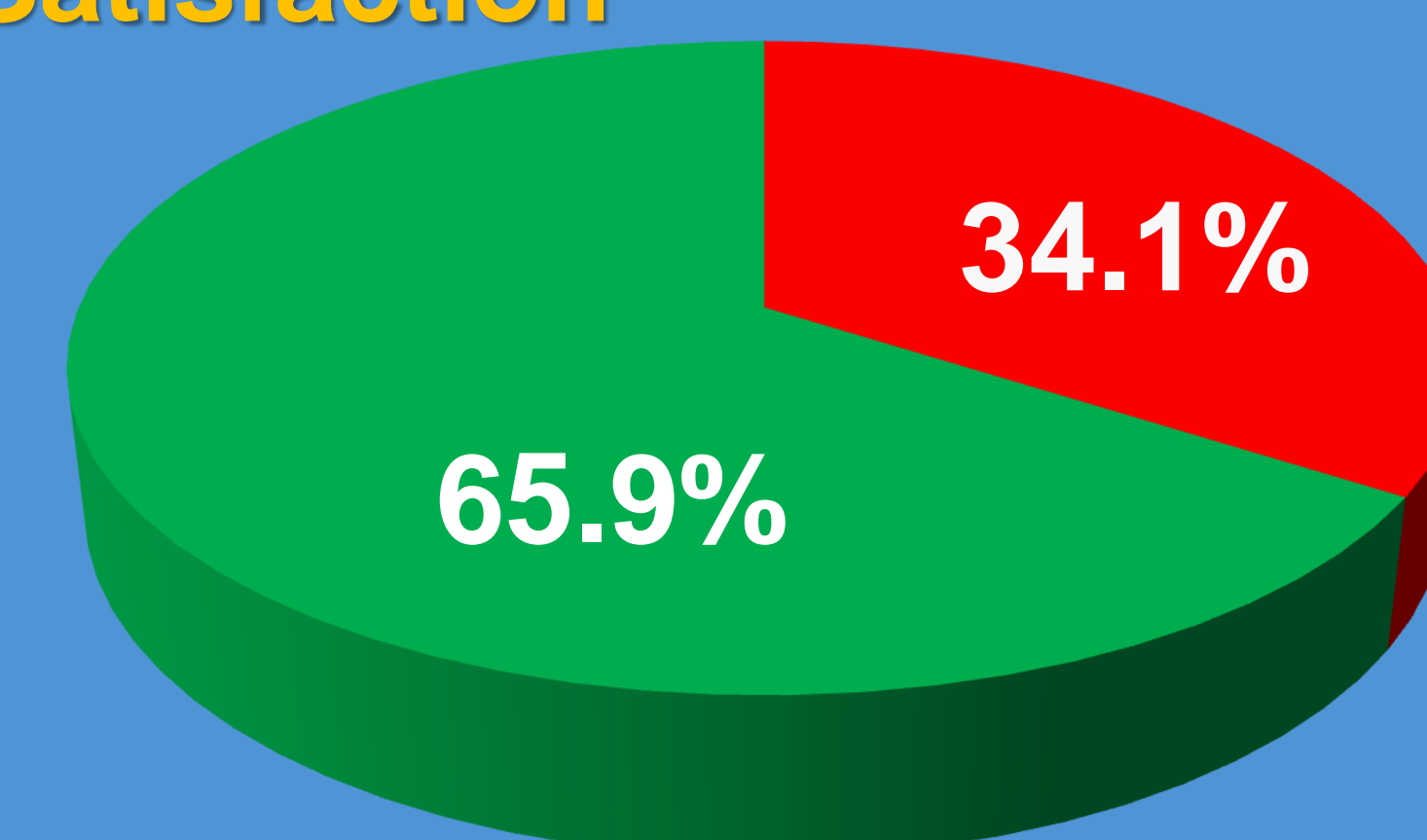


Satisfaction was
► highly correlated with PAIN on VAS
► unrelated to sex (p=0.29) and age (p=0.53).

- Very satisfied + satisfied
- Dissatisfied + very dissatisfied

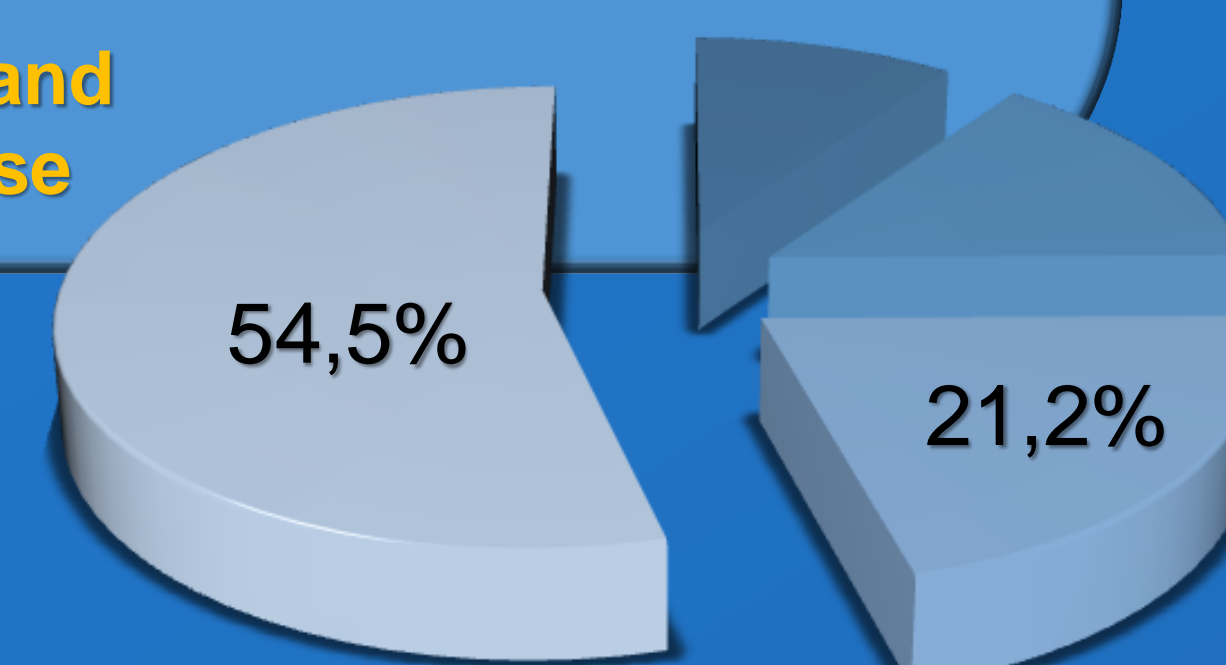
Results : NS Group (N=91)

Satisfaction



% of Analgesics and NSAIDs decrease

- <25%
- >25-50<
- >50-75<
- >75%



Results : THA Group (N=46)

Satisfaction

