



**CORSO  
TEORICO-PRATICO  
DI CHIRURGIA  
ARTROSCOPICA**

BOLOGNA, 23-25 FEBBRAIO 2010  
Centro Congressi Hotel Sheraton

*Presidente*

Fabrizio Pellacci

*Vice Presidenti*

P. Adravanti, M. Berruto, E. Sabetta

*Con il patrocinio richiesto di:*



S.I.O.T.



S.I.A.



S.I.G.A.S.C.O.T.



S.I.C.S.c.G.



ORDINE DEI MEDICI CHIRURGHI  
E DEGLI ORTODONTOLATRI DI BOLOGNA



FACOLTÀ DI MEDICINA E CHIRURGIA,  
UNIVERSITÀ DI BOLOGNA

*Con il patrocinio scientifico di:*

MAYO CLINIC

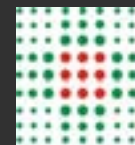


**ANCA**

# INDICAZIONI E LIMITI DELL'ARTROSCOPIA

E. Sabetta

**Struttura Complessa  
Ortopedia e Traumatologia  
Arcispedale S.Maria Nuova Reggio Emilia  
Direttore: Ettore Sabetta**



**SERVIZIO SANITARIO REGIONALE  
EMILIA-ROMAGNA  
Azienda Ospedaliera di Reggio Emilia**



to my friend  
E. Ganz  
& with sympathy for Reinhold Ganz

Reinhold Ganz



Marc Philippon

# INDICAZIONI ARTROSCOPIA ANCA

- Conflitto femoro-acetabolare (FAI)
- Lesioni labbro acetabolare
- Corpi mobili (isolati, condromatosi)
- Lesioni cartilaginee
- Anca a scatto
- Artriti settiche / asettiche
- Lesioni legamento rotondo
- Lassità capsulare



# DIAGNOSI DIFFERENZIALE COXALGIA

The Masters Experience

In

Hip Arthroscopy



Master Instructors

Victor M. Ilizaliturri Jr., MD

Marc J. Philippon, MD

Marc R. Safran, MD

Presented by

Arthroscopy Association of North America

July 25-27, 2008

## Differential Diagnosis

- Piriformis Syndrome
- Snapping Hip
- Osteitis Pubis
- Athletic Pubalgia
- Muscle Strains
- Stress Fractures
- Avulsion Apophyseal injuries
- Bursitis
  - Iliopsoas
  - Trochanteric
- Osteonecrosis
- FAI
- Labral tears
- Hip Dysplasia
- Osteoarthritis
- Inflammatory Arthritis
- Hip / thigh contusions
- Nerve Entrapment Syndromes
- Hip Dx / AVN
- Medical causes
- GI / GU
- Lumbar Spine

Safran MR, 2008



# LESIONI DEL LABBRO



Il solo trattamento delle lesioni del labbro trascurando le anomalie ossee rappresenta la principale causa di fallimento

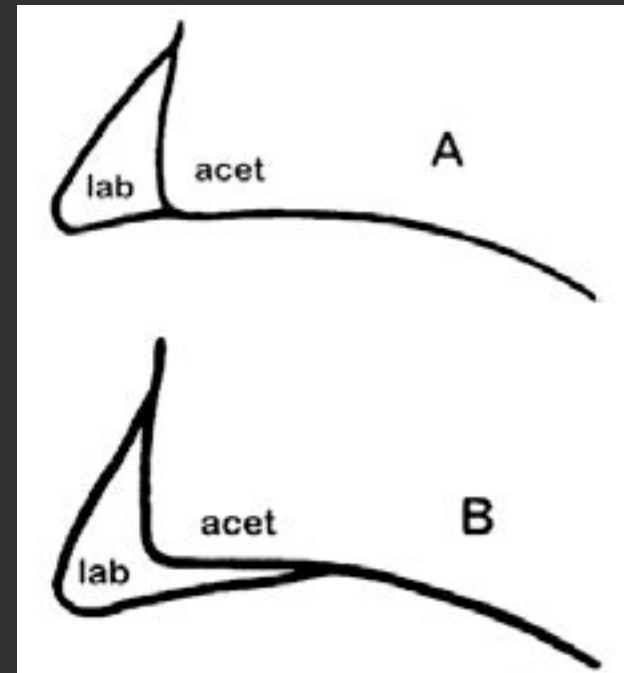
- Heyworth et al 2007
- Kim et al. 2007

Displasia, Perthes, Epifisiolisi, Coxa vara, Lassità legamentosa, Traumi, FAI, Artrosi, ....

# LABBRO

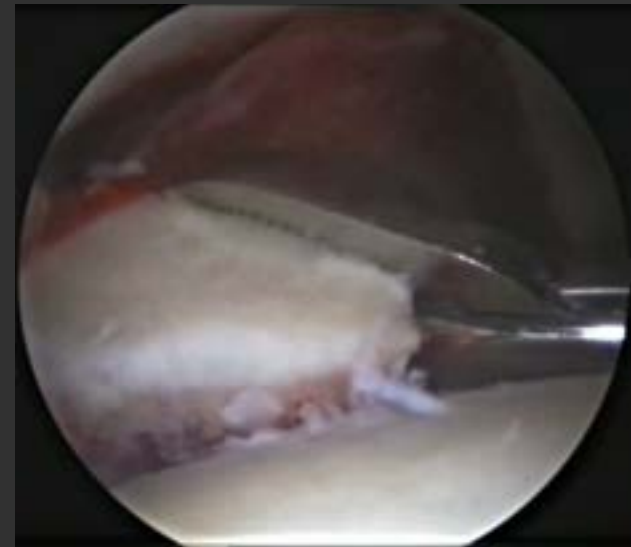
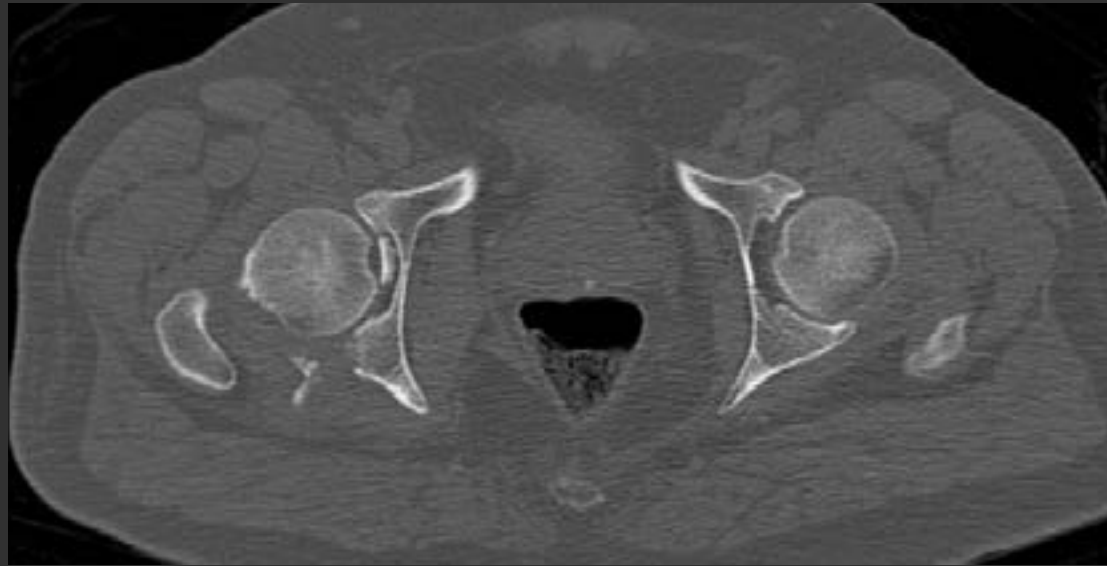
## CONTRO-INDICAZIONE AL TRATTAMENTO CHIRURGICO

- Displasia anca Leunig et al. CORR 467-3-09




Byrd 2002

# CORPI MOBILI



# INDICAZIONI NELL'INFANZIA E NELL'ADOLESCENZA

- **Corpi mobili**
  - ◆ Legg-Perthes
  - ◆ Displasia spondilo-epifisaria
  - ◆ Lesioni traumatiche
- **Lesioni labbro**
  - ◆ Displasia
  - ◆ Legg-Perthes
  - ◆ Epifisiolisi
  - ◆ Sub-lussazioni neuropatiche
- **Anomalie morfologiche epifisarie**
  - ◆ Displasia
  - ◆ Legg-Perthes
  - ◆ Epifisiolisi
  - ◆ Coxa-vara
- **Artriti**
  - ◆ Settiche
  - ◆ Reumatiche

Lavaggio / Sinovialectomia

- Kocher et al. 2006
- Ilizaliturri 2007



# ANOMALIE MORFOLOGICHE EPIFISARIE



Ragazzo 13 anni,  
coxalgia dx dopo caduta accidentale,  
RX dopo 8 mesi



# ARTRITE SETTICA

9 anni, nigeriano, artrite settica da staph. aureo



# LEGAMENTO ROTONDO

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## Ligamentum Teres

### Function

- ❖ blood supply - Wertheimer LG. JBJS 1971

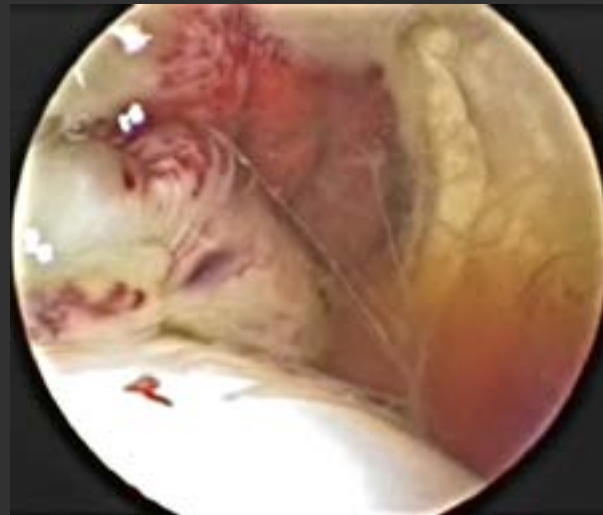
- ❖ stability - Rao J. Clin Sports Med 2001

### Incidence of injury

- ❖ Found in 8% of 1000 consecutive scopes

*Rao J. Clin Sports Med 2001*

Philippon MJ, 2008



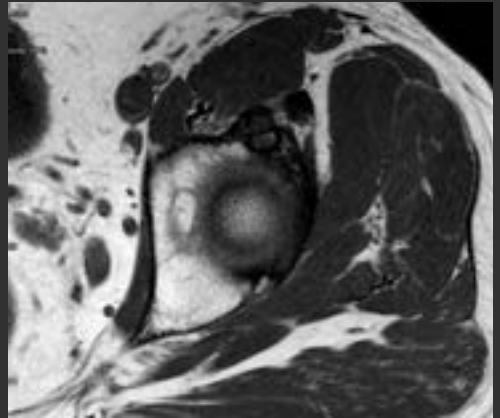
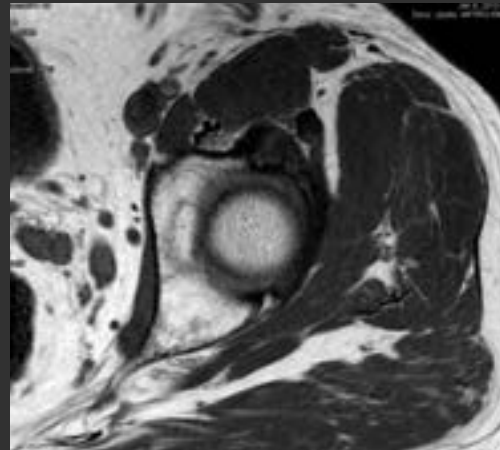
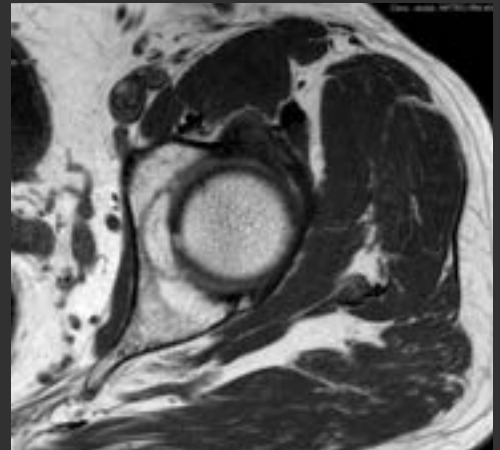
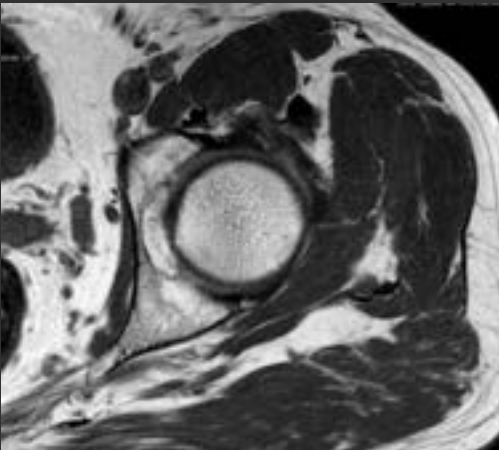
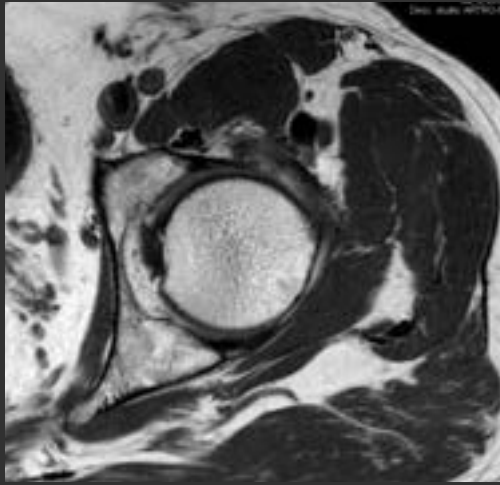
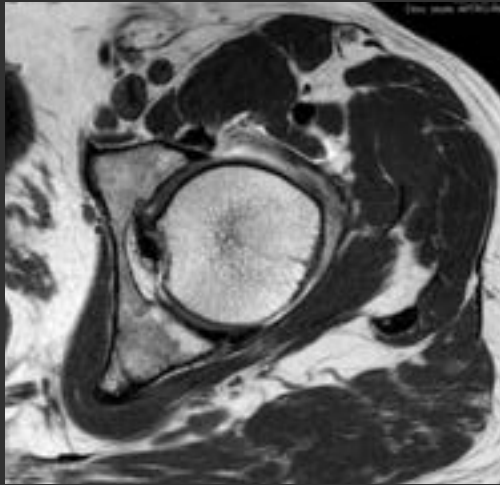
# ANCA A SCATTO

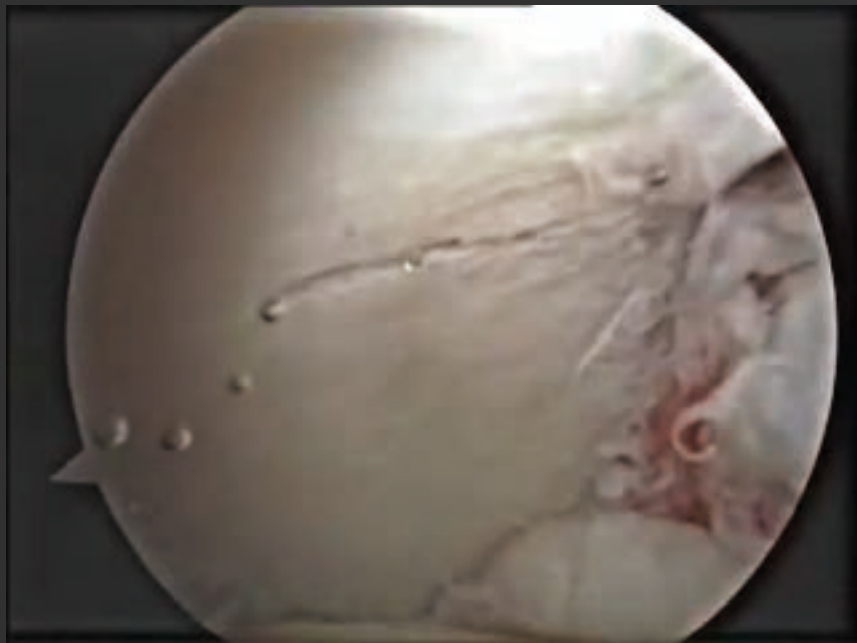
Uomo, 61 anni, ex-calciatore, da 3 anni scatto anca sinistra



RX di due anni prima









# ARTROPROTESI ANCA

Uomo, 46 anni, 15-11-2006



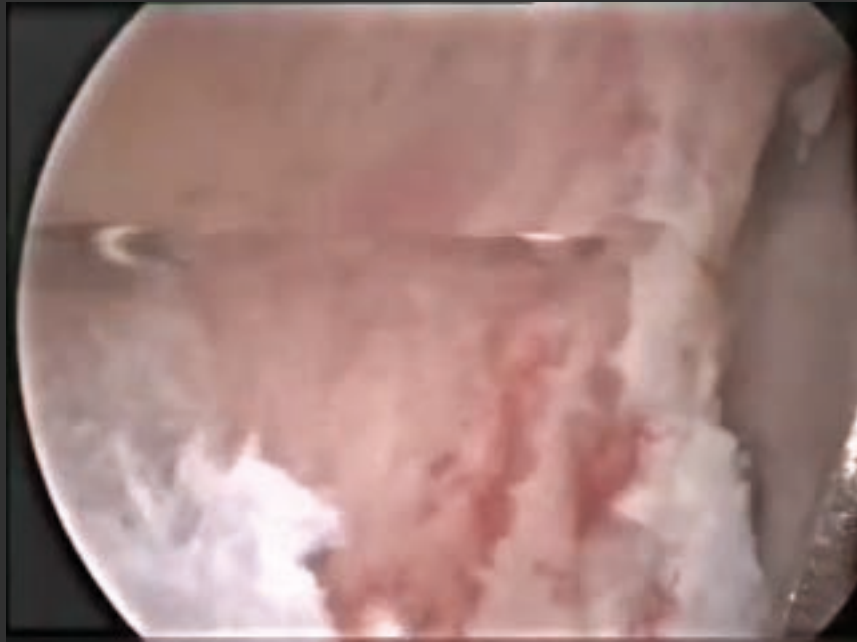


Post-op



8 mesi post-op





# Post-artroscopia, 3 anni dopo impianto protesi



# ANCA INSTABLE

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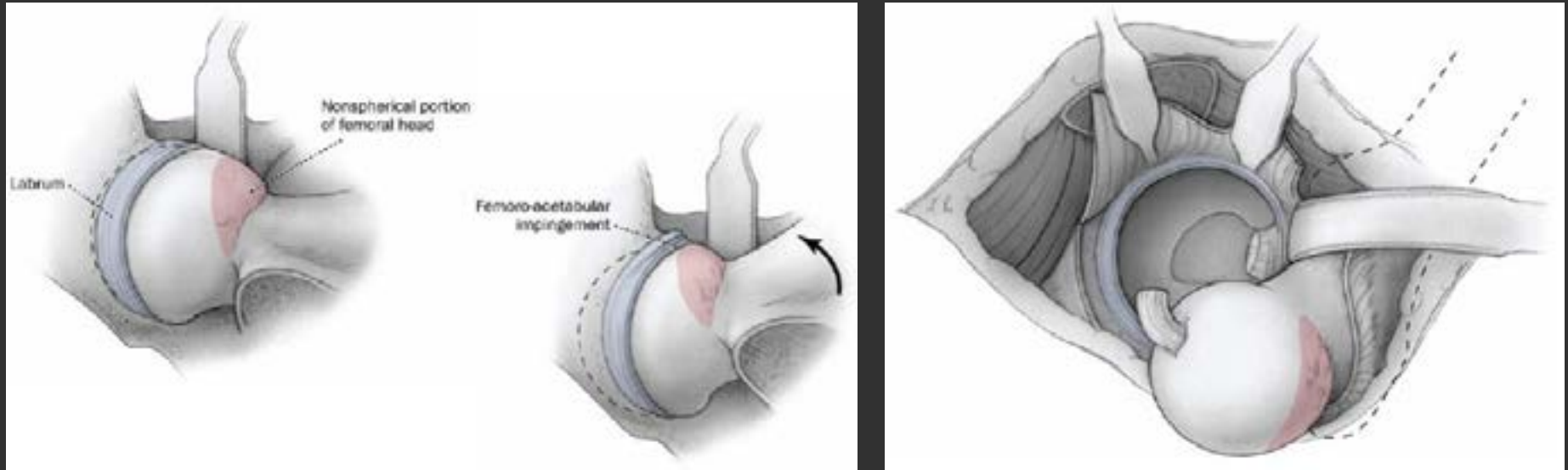
## Hip Instability

- Sub-group of patients with labral tears and chondral injuries
  - Report feelings of instability or giving way
  - Difficulty with prolonged standing
  - Capsular redundancy identified at arthroscopy

Philippon et al. ESSKA 2006

Philippon MJ, 2008

# CONFLITTO FEMORO-ACETABOLARE (FAI)



Il trattamento chirurgico del FAI con la lussazione chirurgica dell'anca consente di ottenere buoni-eccellenti risultati nel 70-80% dei casi nel breve-medio periodo

Treatment of femoro-acetabular impingement: preliminary results of labral refixation. Surgical technique. N. Espinosa, M. Beck, DA. Rothenfluh, R. Ganz, M. Leunig. JBJS Am 2007; 89:36-53

# FAI

## *INDICAZIONI ARTROSCOPIA*

- Deformità strutturali minori e CAM





# FAI

## CONDRO-INDICAZIONI ARTROSCOPIA

- Deformità complesse (PINCER + CAM)
- PINCER globale  
(coxa profunda, protrusio acetabuli)
- Conflitto extra-articolare
- Procedure associate
  - osteotomia collo femore
  - osteotomia intertrocanterica
  - osteotomia periacetabolare

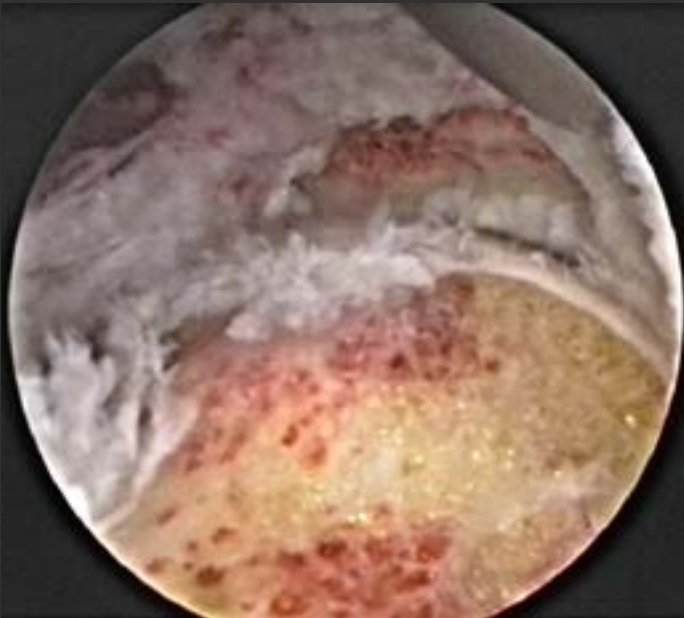
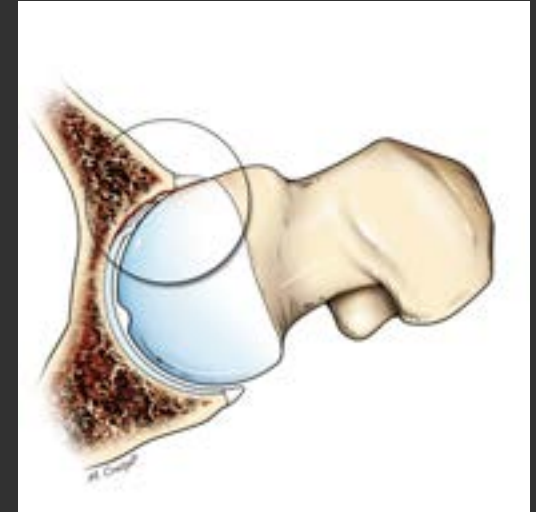


# INCOMPLETO RIMODELLAMENTO

E' la più frequente causa di re-intervento

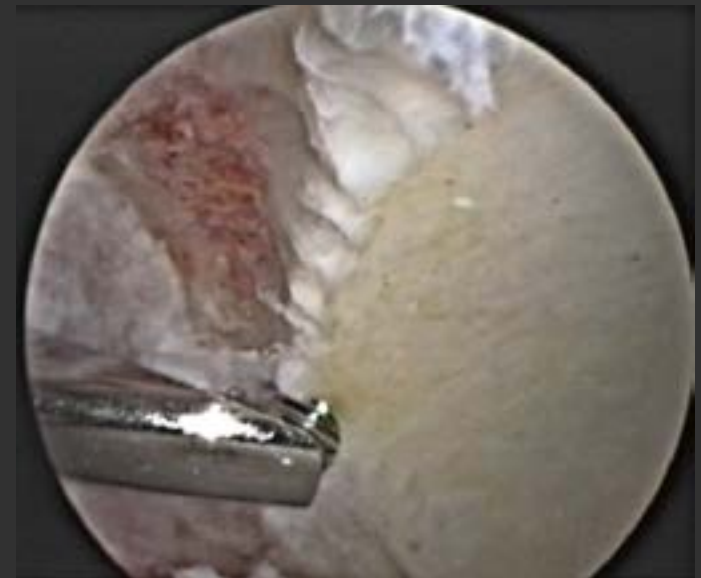
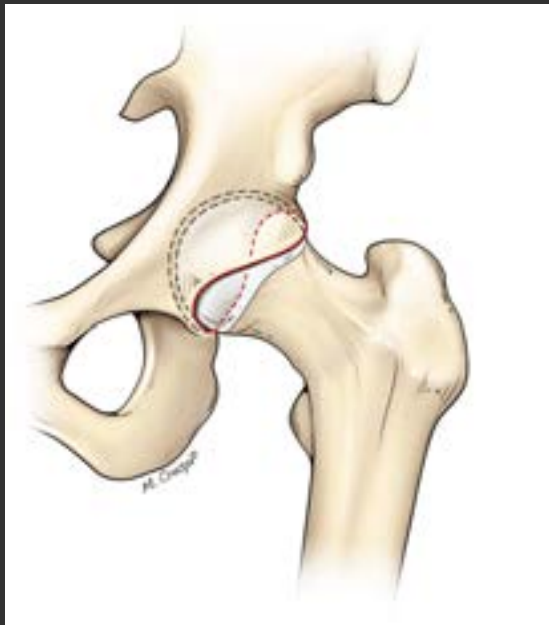
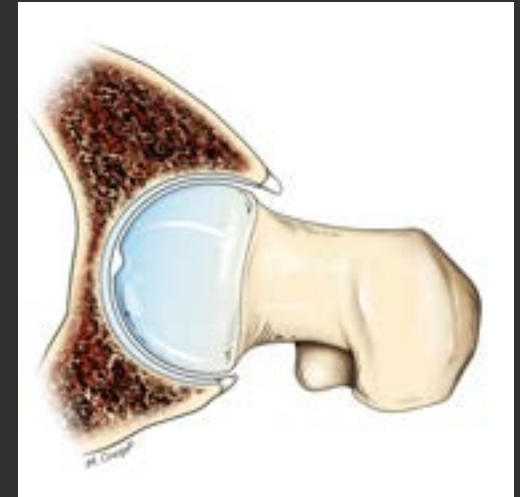
92% Philippon et al. 2007

79% Heyworth et al. 2007



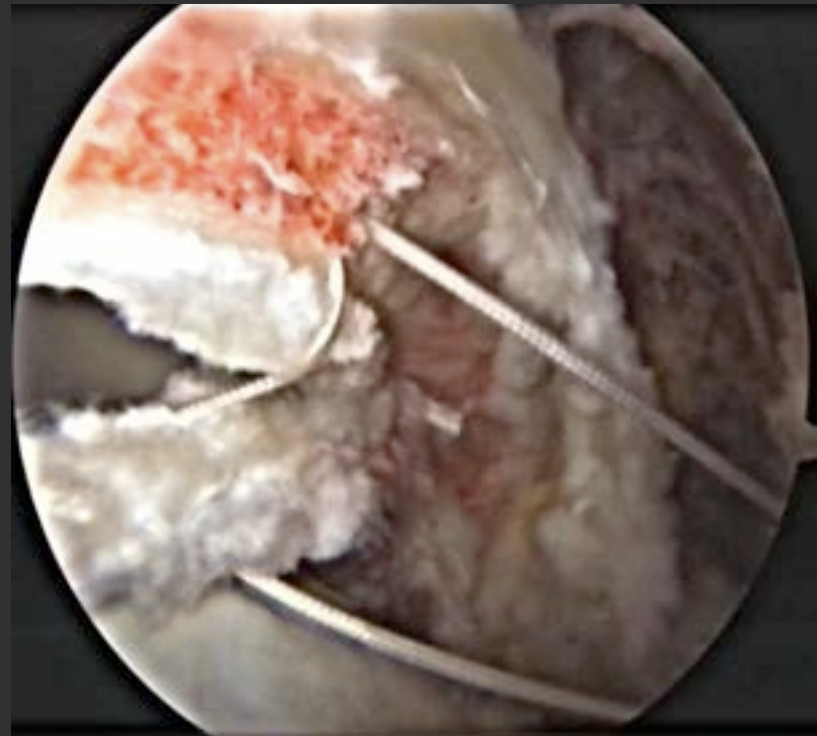
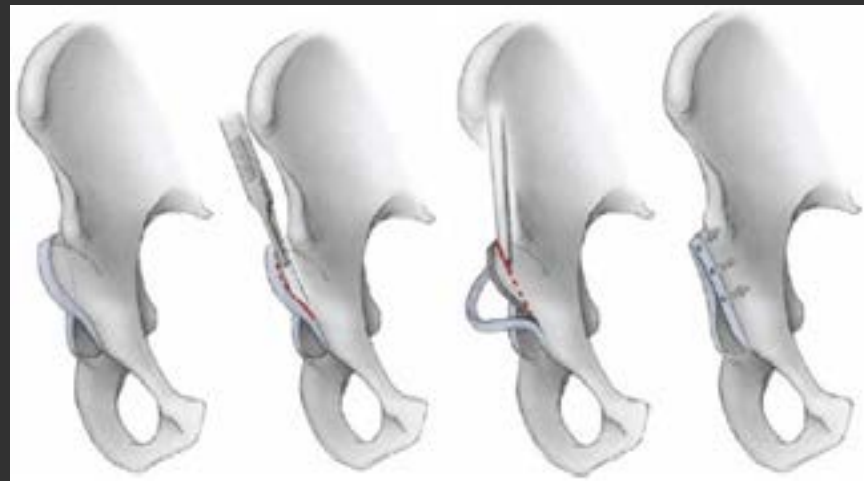
# PINCER

- Difficile valutare l'estensione e la profondità della parete anteriore da rimuovere
- Il distacco/ri-fissazione del labbro è tuttora difficoltosa in artroscopia)



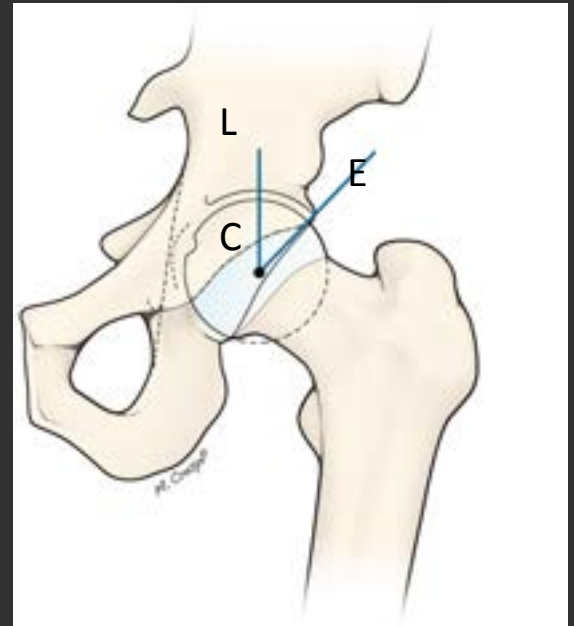
# PINCER

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# ANGOLO LCE (25° - 45°)

- Angolo LCE  $> 25^{\circ}$ - $30^{\circ}$   
→ trimming artroscopico
- Angolo LCE  $20^{\circ}$ - $25^{\circ}$   
→ evitare trimming eccessivo
- Angolo LCE  $16^{\circ}$ - $20^{\circ}$   
→ valutare osteotomia

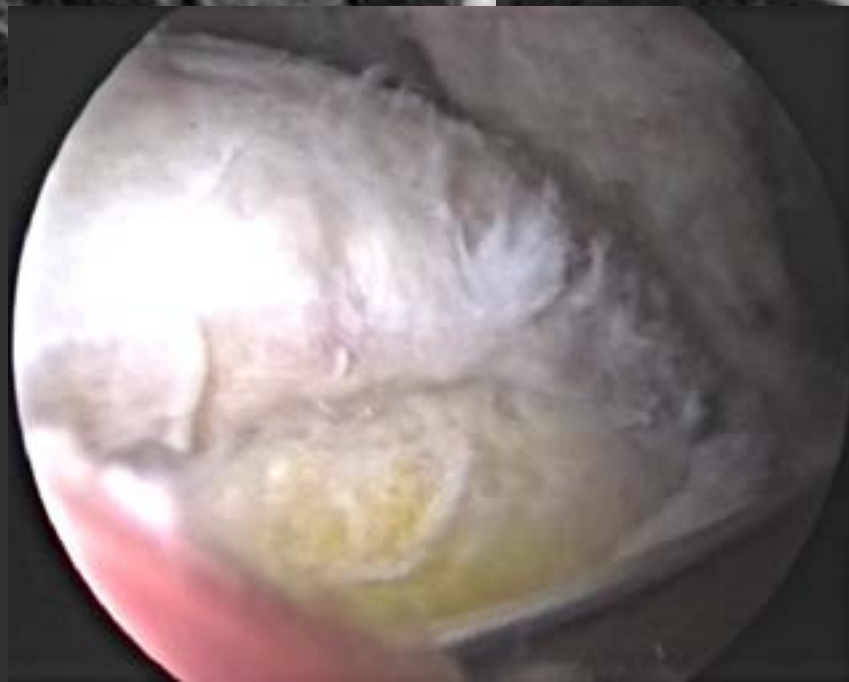


# Dove finisce il FEA e dove inizia l'artrosi?

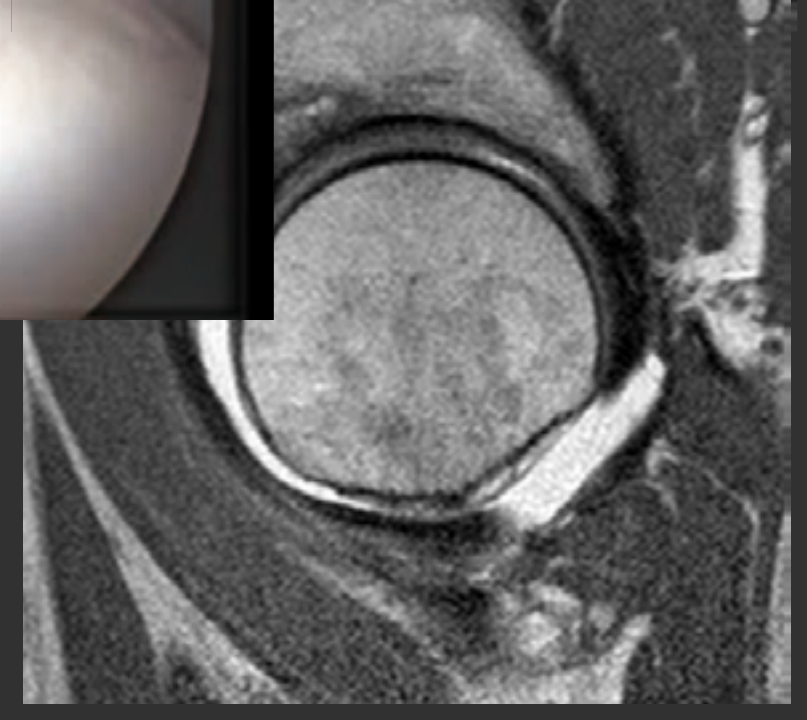
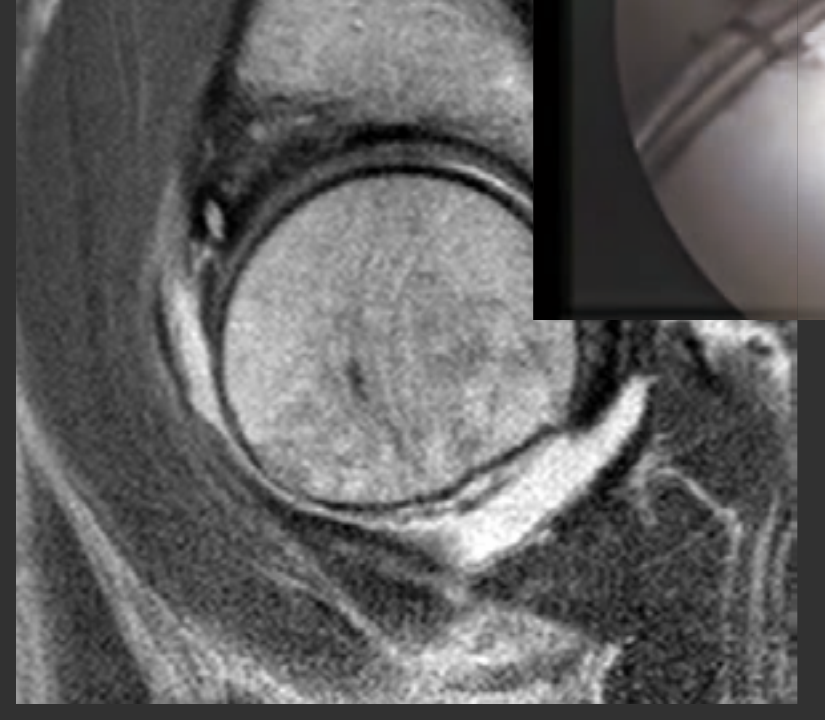
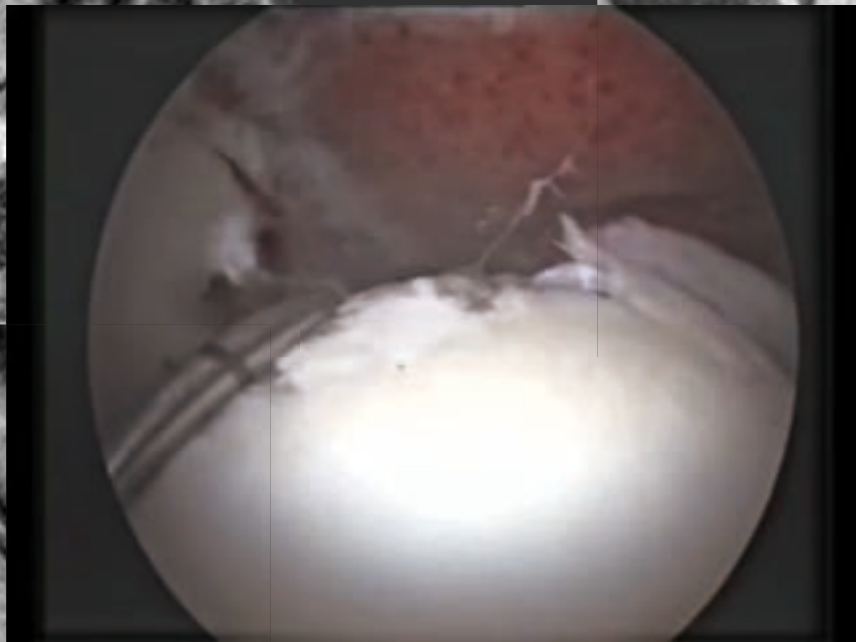
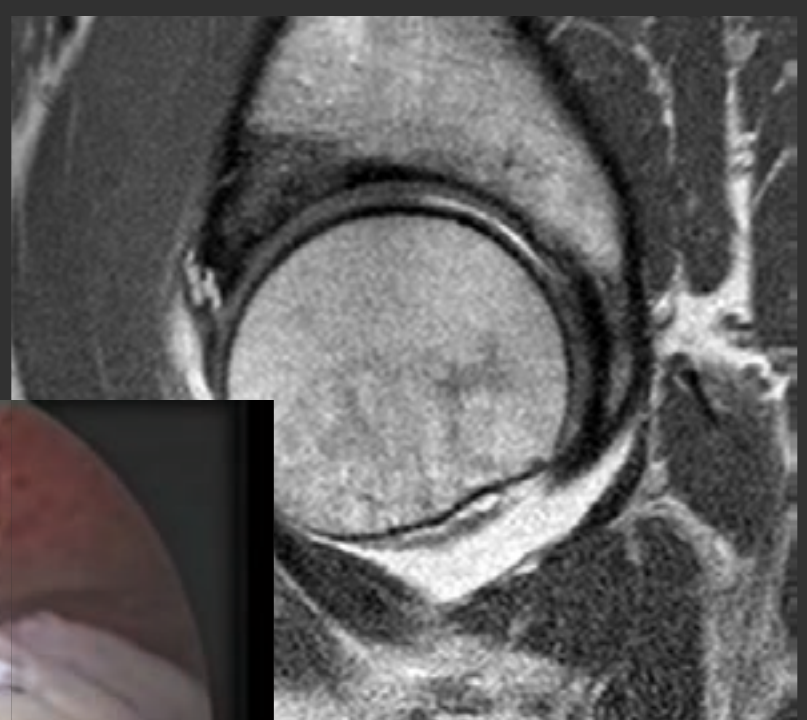
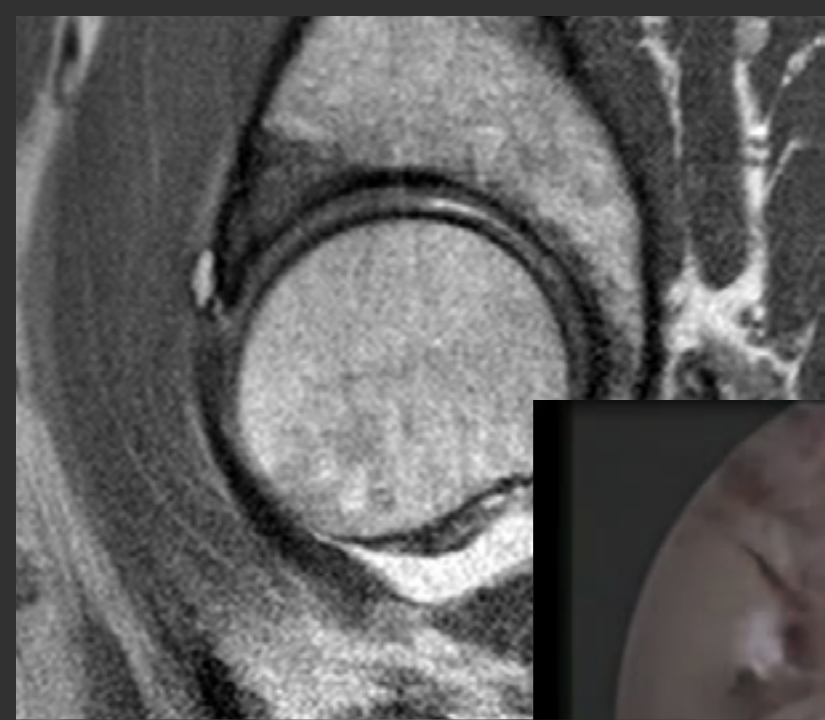
C. S., donna 48 anni, dolore anca sinistra



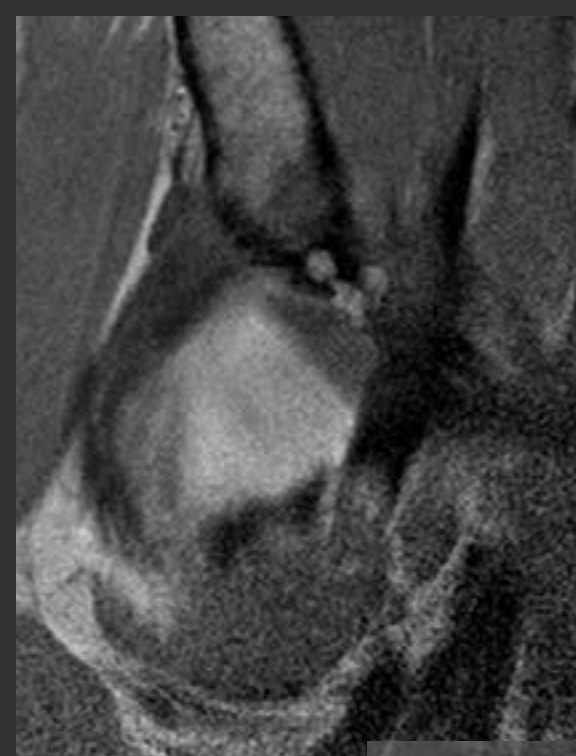


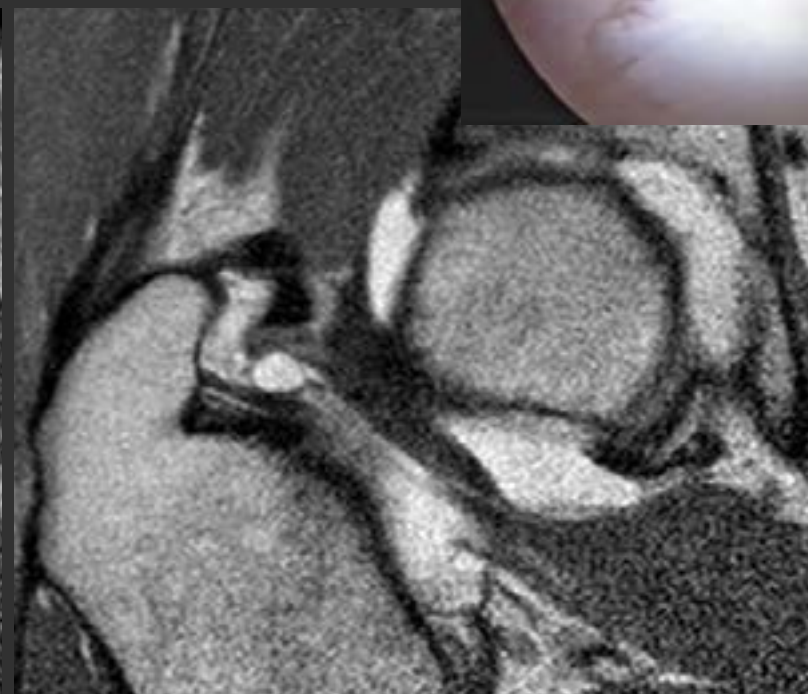
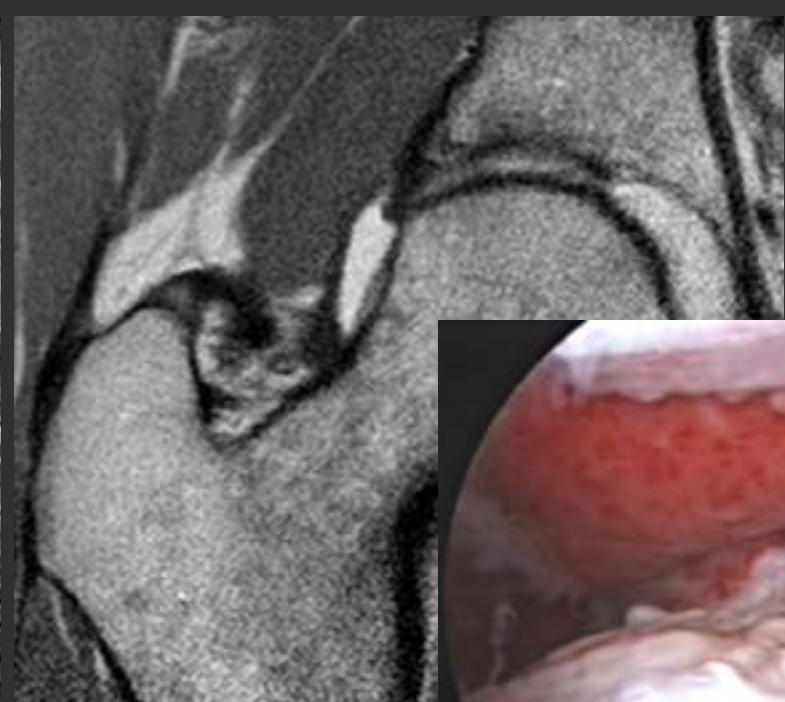




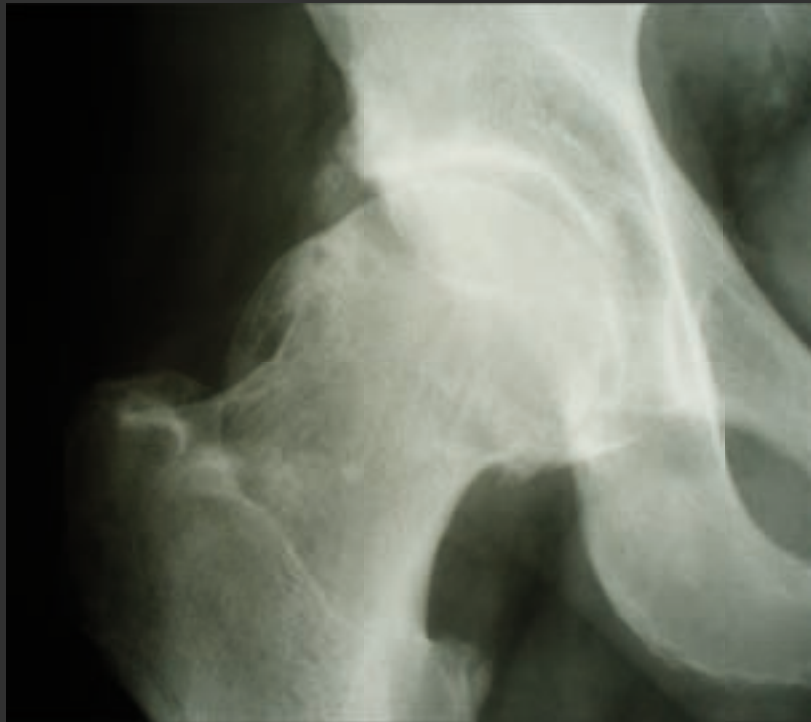








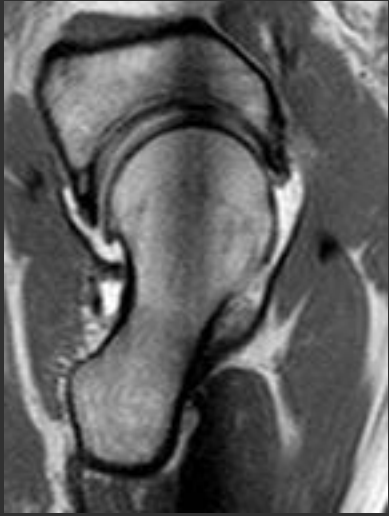
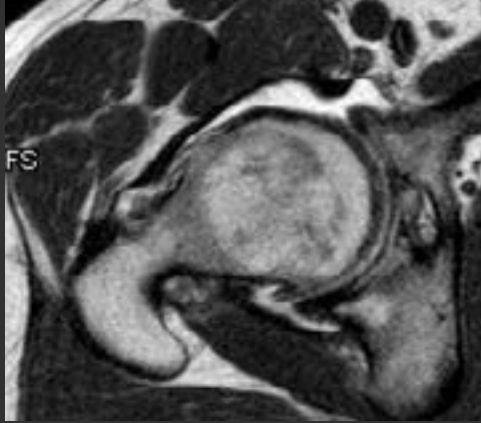
Uomo 61 anni, gioca a tennis regolarmente, disturbi da 1 anno:  
limitazione funzionale, dolore solo ai gradi estremi

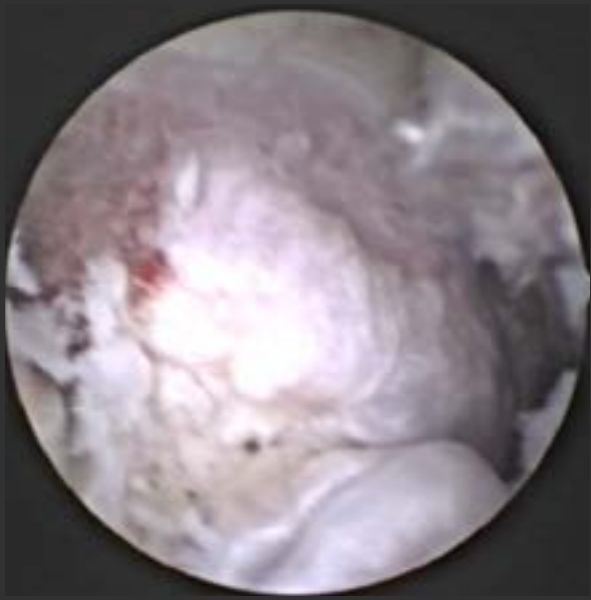
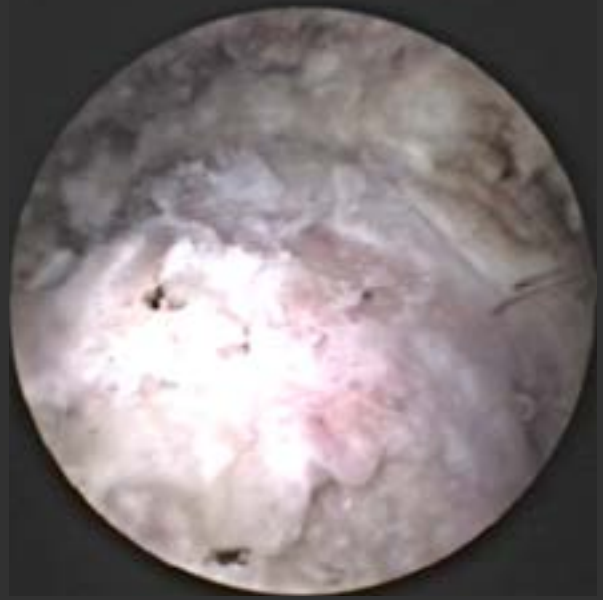
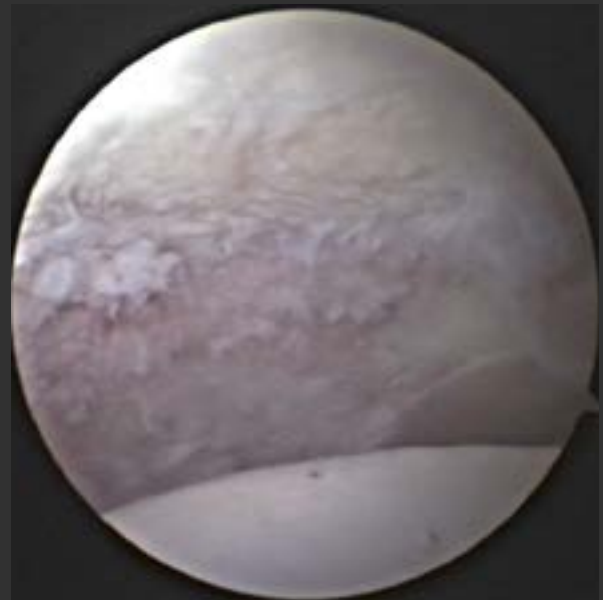
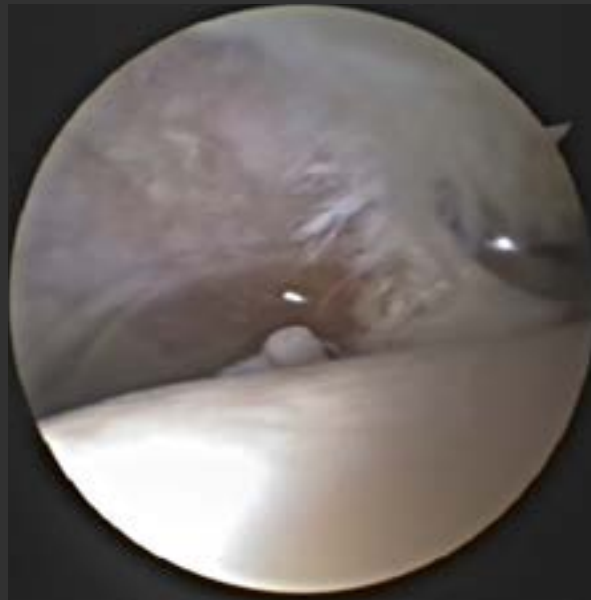






Uomo 31 aa  
insegnante judo

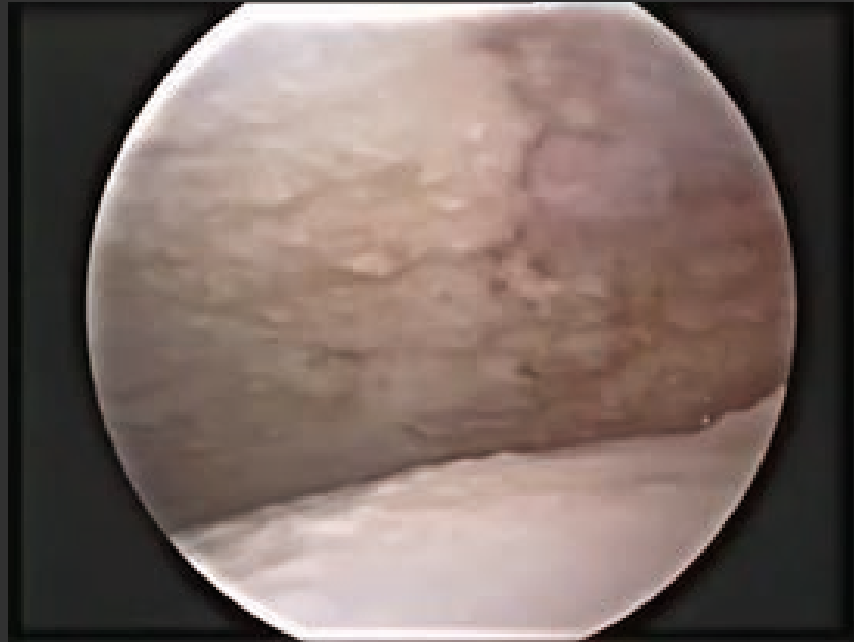




RX dopo artroscopia



## Seconda artroscopia



Apr 17, 2009 6:21:59 PM  
Desc. Study: ANCA DX

IO

10 00



# CONCLUSIONI

- C'è ancora molto da conoscere sulla fisio-patologia dell'anca
- L'artroscopia trova spazio in molteplici patologie con ragionevoli aspettative di successo e con accettabile % di complicazioni
- Alcune indicazioni sono chiare (corpi mobili), altre meno (FAI, artrosi)
- Limitare le indicazioni oltre i 40 anni, specialmente nelle donne



GRAZIE