



髋臼重建及股骨转子下短缩截骨全髋关节置换治疗Crowe IV型髋关节发育不良

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Total hip arthroplasty with subtrochanteric femoral shortening osteotomy for Crowe IV developmental dysplasia of the hip

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摘要 目的 探讨髋臼重建及股骨转子下短缩截骨全髋关节置换治疗Crowe IV型髋关节发育不良的临床疗效。方法 2003年9月至2012年9月收治Crowe IV型髋关节发育不良患者21例(24髋),男3例,女18例;年龄28~71岁,平均(54±10)岁。采用髋臼重建,股骨转子下横行短缩截骨,股骨近端非骨水泥假体全髋关节置换术。髋臼成形后联合自体结构性骨移植修复骨缺损,生物型假体或钛网骨水泥重建髋臼。陶瓷-聚乙烯股骨头臼界面17例(20髋),金属-聚乙烯4例(4髋)。股骨截骨端自体骨移植18例(21髋),异体骨移植原位钢丝捆扎3例(3髋)。术后采用Harris髋关节评分系统评估髋关节功能。结果 3例失访。随访18例(21髋),随访时间0.5~9年,平均3.5年。Harris髋关节评分从术前(47.9±9.1)分提高至术后6个月(88.4±3.5)分。术后髋关节疼痛明显改善,肢体活动度增加,步态接近正常。1例术后并发坐骨神经麻痹,无伤口感染病例。术后6个月X线片均显示髋臼假体骨性覆盖、假体及植骨床压配较好,无髋臼假体松动及植骨块明显吸收,截骨端骨愈合良好。结论 髋臼重建及股骨转子下短缩截骨全髋关节置换适用于Crowe IV型髋关节发育不良,尤其是高龄髋关节高脱位患者。操作相对简单,能够改善肢体不等长,可避免一次性过度肢体延长导致的坐骨神经损伤。

关键词: 髋脱位 先天性 髋臼 关节成形术 置换 髋

Abstract: Objective To evaluate the clinical efficacy of total hip arthroplasty with subtrochanteric femoral shortening osteotomy for Crowe IV developmental dysplasia of the hip. Methods From September 2003 to September 2012, 21 patients (24 hips) underwent total hip arthroplasty with subtrochanteric femoral shortening osteotomy for Crowe IV developmental dysplasia of the hip in our hospital. There were 3 males and 18 females, aged from 28 to 71 years (average, 54±10 years). The ceramic-polyethylene articulation was used in 17 patients (20 hips), and metal-polyethylene articulation in 4 patients (4 hips). The osteotomy site was treated with autologous bone graft in 18 patients (21 hips) and allogeneic bone graft in 3 patients (3 hips). The Harris hip score was used to assess the clinical results. Results A total of 18 patients were followed up for 0.5 to 9 years (average, 3.5 years). The Harris hip score was improved from preoperative 47.9±9.1 to 88.4±3.5 at 6 months postoperatively. For most patients, hip pain relieved significantly; range of motion of the hip was improved, and the gait returned to normal. Sciatic nerve palsy occurred in 1 patient. There was no wound infection. X-rays 6 months after operation showed that the position of prostheses was satisfactory, without loosening of prostheses and bone block resorption. Conclusion Total hip arthroplasty with subtrochanteric femoral shortening osteotomy can achieve good clinical effect in Crowe IV developmental dysplasia of the hip. Moreover, it can improve leg length discrepancy and decrease the risk of sciatic nerve injury.

Key words: Hip dislocation, congenital Acetabulum Arthroplasty, replacement, hip

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