## Urgent Hip Hemiarthroplasty by Anterior Approach in 31B13 Fractures of the Femoral Neck

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Introduction: The characteristics and possible complications related to intracapsular fractures of the proximal femur require individualized surgical treatment. Hemiarthroplasty in patients with relatively decreased activity and life expectancy has been reported to provide a period of good function and limited pain post-operatively. This intervention, which can be acutely employed using an anatomical approach, enhances this result. The objective of this study is to present surgical results at one month, six months, and one year following hip hemiarthroplasties for acute femoral neck fractures utilizing an anterior approach.

**Method:** This is a descriptive-prospective study of patients undergoing emergency hip hemiarthroplasty using an anterior approach for the diagnosis of displaced intracapsular fractures of the proximal femur, classified as 31B13 AO/OTA fractures. Demographic and outcome data were collected at routine post-operative intervals.

**Results:** Females between 70-79 years of age were the predominate demographic. The average BMI was  $26 \pm 3$  Kg/m2. The Harris Hip Score, the Pain Scale, and activities of daily living improved during the study period. Few complications were observed.

Table 1. Patient Distribution by Age and Sex

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	Sex				Total		
Age in Years	Male		Female		Total		
	No	%	No	%	No	%	
65-69	1	14,3	3	23,0	4	20,0	
70-79	4	57,1	7	53,9	11	55,0	
80-89	2	28,6	2	15,4	4	20,0	
≥90	-	-	1	7,7	1	5,0	
Total	7	100	13	100	20	100	
% total	35,0		65,0		100		
Mean Age	7	0,6	7	5,1	74±3	years	

**Table 3.** Post-Operative Complications

Complication	Occurence (# of Patients, n)	
Hip-Related	1	
Surgical Site Infection	1	
General Complications	1	
Thromboembolism & VT	1	
Kidney Sepsis	1	

**Table 4.** Funcional Results Over Time

Harris Hip Score	EVA	ADLs
Time Point	Pain Score	Improvement
1 month 72 ± 12	$4 \pm 2$	50%
3 months 81 ± 11	2 ± 1	65%
6 months 85 ± 10	1 ± 1	83%

Table 2. Patient Data

Male	No=7	35%					
Female	No=13	65%					
Age (mean)		$74 \pm 3$					
Body Mass Index $(Kg/m^2)$ 26 ± 3							
Functional classification (Charnley)							
A	No=18	90%					
В	No=2	10%					
Activities of Daily Living (ADLs)							
Independen	t No=9	45%					
Dependent	No=11	55%					
Mobility							
Independer	nt No=9	45%					
With suppo	ort No=11	55%					
Surgical Data	a						
Operating Time (min) 70 ± 18							
Blood Loss	s (ml)	$340 \pm 150$					

**Conclusion:** Urgent hip hemiarthroplasty through an anterior approach offers adequate patient satisfaction and early return to activities of daily living, with limited pain and low incidence of complications.