

Editorial Commentary: Femoroacetabular Impingement Under-resection Is the Primary Indication for Revision Arthroscopy



Abstract: Complications indicating revision after hip arthroscopy generally manifest within 24 months. Femoroacetabular cam or pincher impingement deformity under-resection is the primary indication for revision arthroscopy. Revision results in decreased pain and improved function, and primary and revision hip femoroacetabular impingement arthroscopic surgeons must be mindful of femoral cam lesion over resection, which could result in iatrogenic femoral neck fracture.

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It should be no surprise that your editor is thrilled with Sardana, Philippon, de SA, Bedi, Ye, Simunovic, and Ayeni, because in this month's publication, "Revision hip arthroscopy indications and outcomes: A systematic review,"¹ they conclude, "Surgeons should consider incorporating a minimum 2-year follow-up for individuals after an index hip-preservation surgery as revisions tended to occur within this time frame." Your editors also prefer clinical studies reporting a minimum of 24-month follow-up on all patients,² and more than preferring this somewhat arbitrary number of months, we prefer justification of the reason for the preference, as well illustrated by Sardana et al. The main cause of revision is incomplete resection of femoroacetabular impingement cam or pincher deformities, and revision surgery decreases pain and improves function. Femoroacetabular impingement surgeons should avoid under-resection, but are cautioned that cam

lesion over-resection can result in the risk of iatrogenic femoral neck fracture.^{3,4}

James H. Lubowitz, M.D.
Editor-in-Chief

References

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