

Does the response to a diagnostic hip injection predict patient satisfaction with treatment outcomes?

Andrea Boss McCullough, Niyathi Prasad, Julia Arbanas, Heidi Prather, Abby Cheng, Devyani Hunt

Introduction

- Diagnostic hip injections are used to guide management in adolescent and adult hip disorders, with the goal of confirming an intra-articular source of pain



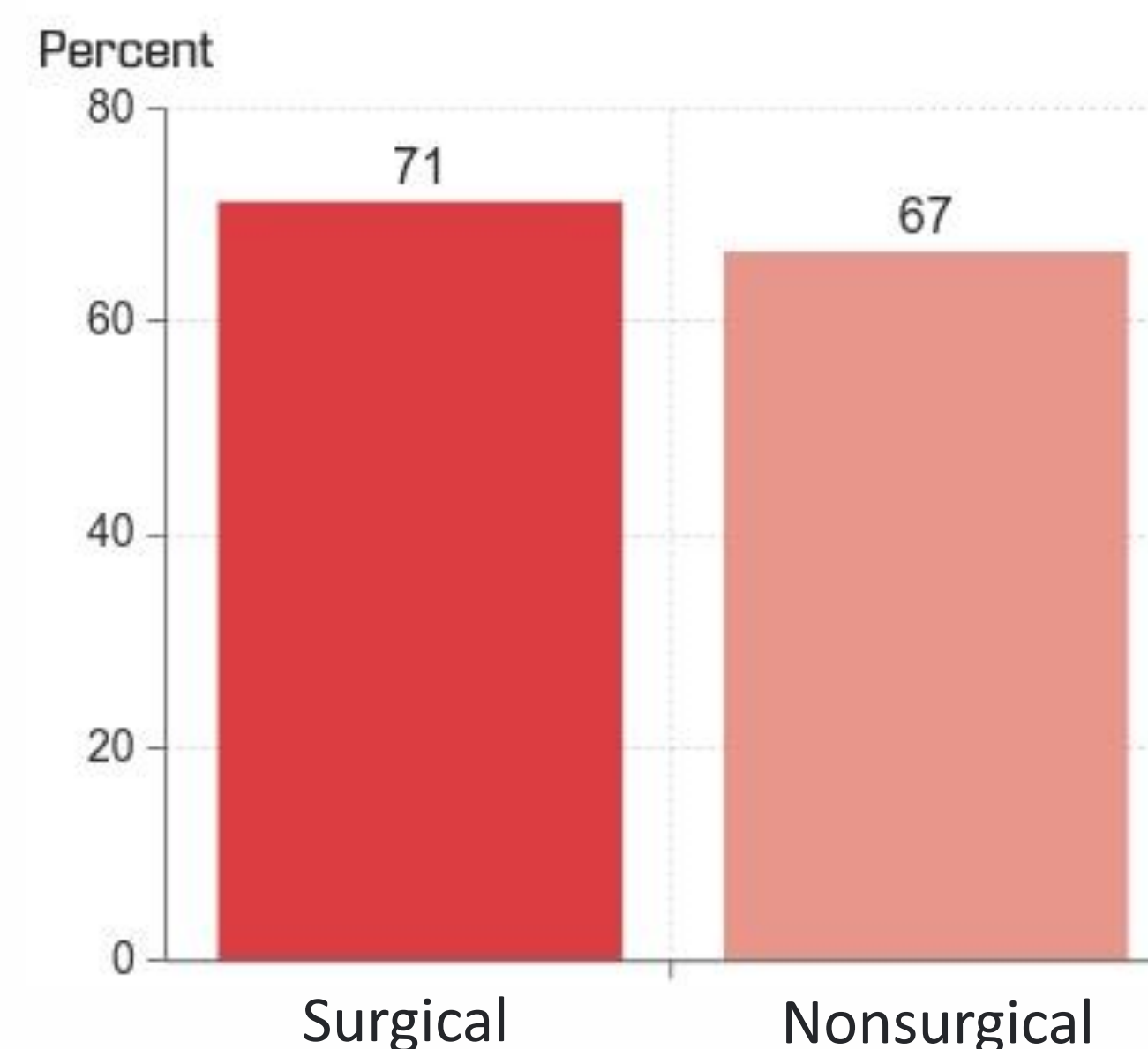
Methods

- Prospective, descriptive study
- Age 12-40 years, patients scheduled to undergo diagnostic hip injection
- Provocative hip exam maneuvers performed pre and 10 minutes post injection
- Numeric pain scores and overall percent improvement were recorded
- If $\geq 50\%$ improvement reported, were considered "responders"
- Progression to surgery and patient satisfaction 1 year post injection were determined

Results

- Fifty patients (56 hips), mean age 18.5 years (SD 5.2), 88% female
- 75% (42/56) of hips were responders, average numeric pain score improvement 3.7 points, compared to average change 0.9 in non responders
- Surgical intervention pursued in 67 % (28/42) of responders and 21% (3/14) of non-responders
- 1 year survey completed by 48% (27/56) patients
- Satisfaction was reported by 71% (10/14) of responders who underwent surgery, 66% (4/6) of responders who did not

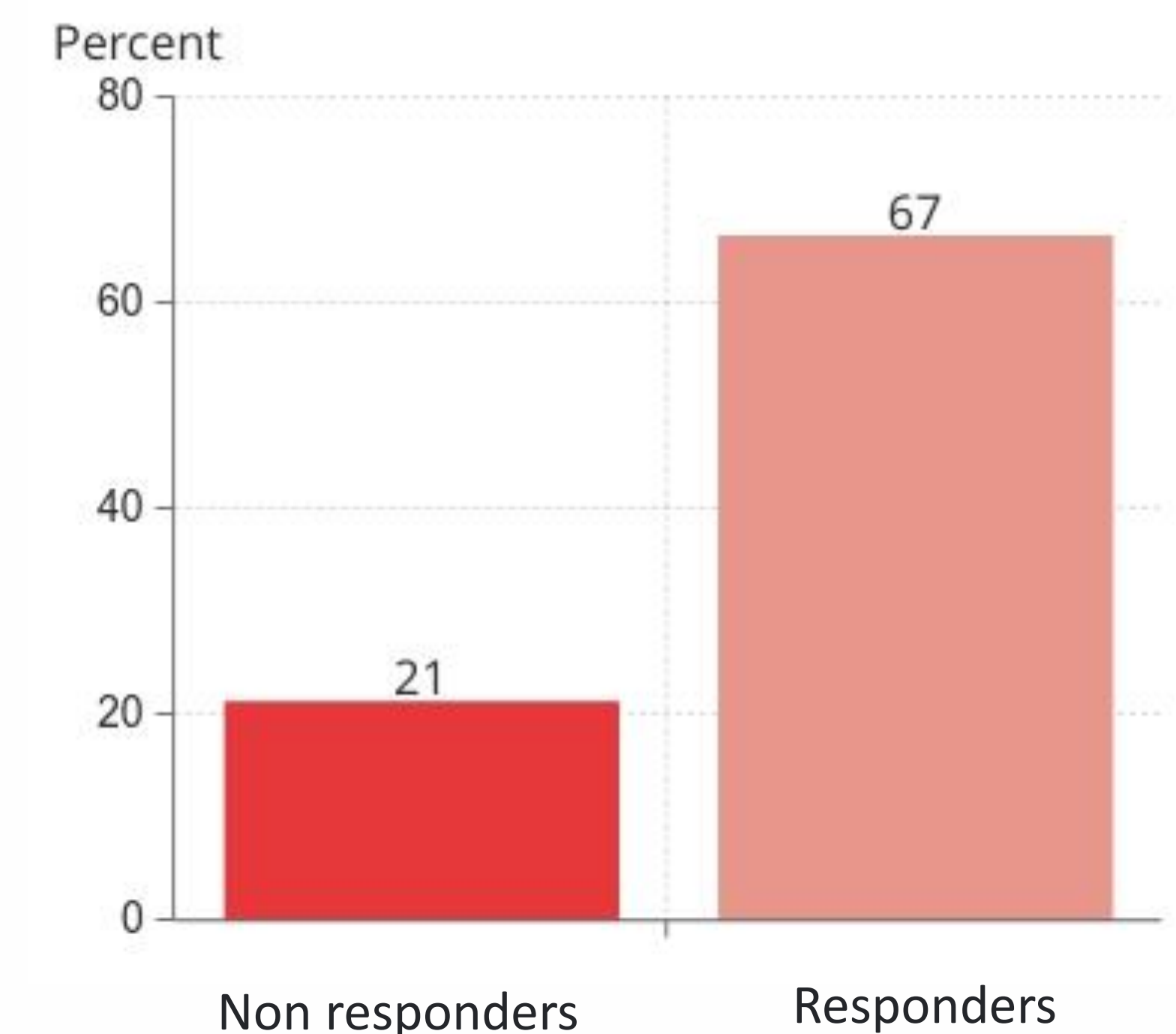
A. Satisfaction Amongst Responders



Images:

A. Amongst responders, those who underwent surgery versus conservative management had similar rates of satisfaction in their treatment outcome at 1 year (71% and 67% respectively)
B. The rate of surgical intervention in the responder group is higher compared to the non responder group (67% and 21% respectively)

B. Rate of Surgical Intervention



Conclusion

- In this patient cohort of adolescents and young adults, those with a positive response to diagnostic intra-articular hip injection were more likely to undergo surgical management
- However, symptom satisfaction one year later was reported by a majority of responders, regardless of whether surgery was pursued.
- A positive response to a diagnostic hip injection likely supports the diagnosis of an intra-articular source of hip pain. However, a satisfactory symptom level was achieved at one year follow-up in the majority of patients, regardless of whether patients proceeded with surgery or conservative care.

References:

1. Byrd, J. W. Thomas, and Kay S. Jones. 2004. "Diagnostic Accuracy of Clinical Assessment, Magnetic Resonance Imaging, Magnetic Resonance Arthrography, and Intra-Articular Injection in Hip Arthroscopy Patients." The American Journal of Sports Medicine 32 (7): 1668–74. doi:10.1177/0363546504266480.

2. Ayeni, Olufemi R., Forough Farrokhyar, Sarah Crouch, Kevin Chan, Sheila Sprague, and Mohit Bhandari. 2014. "Pre-Operative Intra-Articular Hip Injection as a Predictor of Short-Term Outcome Following Arthroscopic Management of Femoroacetabular Impingement." Knee Surgery, Sports Traumatology, Arthroscopy: Official Journal of the ESSKA 22 (4): 801–5. doi:10.1007/s00167-014-2883-y.