OUTCOME OF TOTAL JOINT REPLACEMENT SURGERIES IN PATIENTS WITH INHERITED BLEEDING DISORDERS – ONE CENTER EXPERIENCE

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We present outcomes of 43 total joint replacement surgeries performed in 36 patients over the period of 30 months. All procedures were performed with cooperation and supervision of haematologists.

Material:
- 27 patients - severe hemophilia A
- 6 patients - mild/moderate hemophilia A
- 1 patient - moderate hemophilia B
- 3 patients - type 3 von Willebrand disease
- 1 patient - combined factor VIII and V deficiency

- 40 primary arthroplasties: 28 knees, 9 hips, 2 ankles, 1 shoulder
- 3 revisional arthroplasties: 1 knee, 2 hips

Results:
• good - e.a. ability to walk without sticks, improvement of ROM, no more pain or wheelchair, improvement of live quality – 39 patients.
• transitory complications – 16 patients - mild or moderate bleeds (soft tissue hematomas or joint bleeds).
• failures – 5 patients (1- deep infection, 2- arthofibrosis of knee joint, 1- rectus femoris rupture, 1- prosthesis luxation)
  • no patients developed inhibitors to coagulation factor.
  • one patient developed ileus in the third post-operative day and underwent abdominal surgery with good outcome.
  • no major bleeds were observed.
  • in 16 patients (44%) mild or moderate bleeds were noted: soft tissue hematomas or joint bleeds. Bleeds into the operated joint occurred in 11 patients and in four cases required blood aspiration.

Conclusions:
Hemophiliacs expect mainly pain relief and improvement of their life quality. Range of movement is usually less important. We can therefore conclude that our results are promising and empower us to consider total joint arthroplasty as procedure of choice in the treatment of severe arthropathy in this group of patients.