



# BRITISH HIP SOCIETY

## Affiliated to the BOA

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Hon. Sec Keith Tucker

## BRITISH HIP SOCIETY NEWSLETTER SUMMER 2004

### CONGRATULATIONS

On behalf of the membership the executive have sent congratulations to Hugh Phillips (BHS Hon. Sec. 1989-93, BHS President 1998-2000) on his election as President of the Royal College of Surgeons of England. Hugh is only the 3rd Orthopaedic Surgeon to hold the Presidency.

### SHEFFIELD

The annual meeting in Sheffield was attended by a record number. Ian Stockley and his team made us all very welcome and did a great job.

The visit to "Symmetry / Thorntons" was outstanding. We all saw how a dedicated work force worked to produce the implants our patients enjoy.

The annual dinner in Cutlers Hall was supported by a very generous donation from Symmetry. We are extremely grateful to all those who submitted papers, 135 were received and we are sorry that more did not get a podium presentation. We are grateful to all the speakers who spoke in the topic in focus sessions.

Peter Kay made this meeting his last as Hon. Editorial Sec. and he was warmly thanked for all his outstanding efforts. Peter Howard has now taken over what is a demanding job.

### 2005 ANNUAL SCIENTIFIC MEETING WRIGHTINGTON March 3<sup>rd</sup> and 4<sup>th</sup>

Plans are already taking shape for next year's annual meeting in Wrightington. The following topics in focus are being considered:-

The Charnley Heritage  
Bone Grafting

Revision THR, with emphasis on standards

**The Emerging Hip Surgeon's forum**, which will take place on the Thursday morning will be chaired by Anil Gambhir (Wrightington). Anil would like to hear from anyone who is an SPr or consultant with less than 5 years experience with ideas for the programme.

Al Gross has kindly accepted our invitation to be our Guest speaker.

### **REQUESTS FOR ABSTRACTS**

Abstracts should be sent electronically via the  
BHS website ([www.boa.ac.uk](http://www.boa.ac.uk))

Go to BHS and to "Submitting an abstract"  
Max. 300 words.

The abstract will be printed in JBJS Proceedings  
Closure date 30<sup>th</sup> November 2004.

### **Parallel Meeting for non surgeons.**

Whereas the main BHS meeting will be held in the main hall, a parallel meeting for about 45 will be held in a separate hall with a separate programme.

We have invited members of the "Surgical Assistants" society and members of NATN. **We ask you to** let any physiotherapists, researchers, nurses etc. who you think would find the meeting useful and enjoyable, know of this venture. There will be an audio visual link to the main hall so that this audience can enjoy the "Topics in focus" and the guest lecturers. We hope that members of the society will make themselves available to speak at this satellite meeting on topics that the audience would like to discuss.

The executive feel that hip surgery is a team effort and that the other key people in the team should have a chance to join in our meetings whilst at the same time have an opportunity to meet together and debate issues pertinent to their professions. We won't do it again if it does not work!

### **Elections**

At the AGM elections will be held for:-

- 1) **Vice-President 2005-6** (Proceeding to President Elect 2006-7 and President 2007-8).
- 2) **Member at Large** (2005-7) The constitution demands that the appointee should normally be under the age of 45 at the time of taking office
- 3) **Hon. Sec** (To stand for three years and to be re-elected if mutually agreeable)

Members wishing to stand for any of these posts may contact the Hon Sec. for details and an informal and confidential discussion if they so wish. Candidates should have a proposer and seconder and should write to the Hon Sec declaring their candidature.

### **MANCHESTER BOA**

We have 3 sessions. Two will be free paper sessions on Hip related topics and our Instructional Session will be on "Surface Replacement". We have invited ABHI to join us and each of the firms that produce a "Surface Replacement implant" will be invited to talk about it for a short time. John Fisher will be co-chairing with Martyn Porter. A lot of time will be left for questions. The theme will be "Which one do I use" rather than a repeat argument as to whether it should be done at all. The session has been described as "High Risk" and worries have been expressed that it will be a punch up between the companies. We think it will be at least stimulating. We want the conclusion to involve the training aspects of this initiative. We think that the BHS should always look to new ways to make meetings innovative and enjoyable, hopefully it will work this time!

### **BHS TRAVELLING FELLOWS TO THE USA 2005**

Dedicated hips surgeons who are senior trainees or in their first 5 years of consultant practice who would like to visit several centres of excellence in the USA, courtesy of the American Hip Society, over a 3 week period in late summer/ early autumn 2005 should write to the Hon Sec. at the BOA. They should include 5 copies of their cv. and a brief statement saying how the trip would advantage them. These should be received by Jan 1<sup>st</sup> 2005. Interviews will take place for the short-listed candidates on the Wednesday evening before the meeting in Wroughton and the two successful travelling fellows will be notified at the dinner for the panel and all the short-listed candidates that will follow the interviews.

## **ENDO-PLUS AWARDS**

Endo are continuing with their generous awards and two awards will be made this year to senior trainees who are committed to a career in hip surgery.

### **Derek McMinn**

Derek has very generously indicated that he would like to establish a fund to support training in Hip surgery. Initial discussions have taken place and the exec is discussing how this could be best used. Suggestions are welcome.

### **Websites**

Please visit our website, ([www.boa.ac.uk](http://www.boa.ac.uk)) and go to specialist socs. It has been updated by Peter Howard

Bob Smith (ex Stratec) has created a website for joint replacement patients to exchange thoughts etc [www.njforum.org.uk](http://www.njforum.org.uk)

## **TREATMENT CENTRES**

As we all know there has been a lot in the papers about the introduction of TCs and ITCs. John Timperley and colleagues wrote an excellent letter to the Times and this was followed up by David Jones on behalf of the BOA. Martyn Porter has been fully involved with the ongoing debate. Peter Kay and myself have gone through the responses from our BHS Questionnaire. At the height of the press debate we decided that there was not a lot more that could be usefully said and so we have kept our proposed letter writing until further developments occur. We hope that the membership will agree this was reasonable, all of us were keen to vent our annoyance at the lack of discussion and lack of respect for standards.

## **BUPA and FIPO**

Martyn Porter has been representing our collective views. Not a lot has changed since the last edition of this Newsletter.

## **MENTORING**

It is thought by many that today's newly appointed consultants are not as experienced as those of former years. Whether this is true I leave to the reader! Certainly it is always going to be difficult to train up a revision hip surgeon as an SPr. Some hospitals have a designated mentor to a new appointee and arrangements are made so that the new consultant and the mentor work side by side and scheduling of theatre lists and out-patient sessions takes account of this. Should we take this further? Should the college assessor insist, at the interview in front of the chief executive of the trust, that this should be part of the appointment agreement? Perhaps the emerging hip surgeons would have a view. We will discuss this issue at our executive meeting.

## **GUIDE TO BEST PRACTICE**

The best hip practice guide needs revamping. Should we ask for comments from the standards committee of the DOH and solicit advice from patient user groups, the private sector etc.? It seems they all want to give advice! We might end up with another best practice document from another group if we don't ask for and look carefully at anything they want to say. Your views please, we would like to have a list of headings that should be covered.

James Nixon has been asked to chair the group and when he has returned from sailing in the arctic we will hear from him.

This will be a BOA document.

## **OWNERS MANUAL**

Richard Power writes:-

The final version of the Hip Owner's Manual was completed in April. Unfortunately this coincided with financial cutbacks within the NHS Information Authority resulting in the withdrawal of production funding. However all is not lost as discussions are ongoing with AEA concerning a possible link with NJR. Given the very positive feedback received at the Society's meeting in Sheffield it is very much hoped that this project will reach fruition

## **MEETING WITH THE SPANISH HIP SOCIETY**

The Spanish Hip society have invited us to a joint meeting next May. It sounds great! We will invite the president, Dr, Antonnio Murcia (Gijon) to the Wrightington meeting to make a formal presentation.

**Place:-** Asturias, Northern Spain. (Beautiful countryside and sea)

**Fly:-** Stanstead (direct) or Heathrow, Leeds or Manchester via Bilbao

**Facilitators:-** John Bradley Charles Wyn Jones, Paul Griffin.

**Cost:-** Probably free! (We are negotiating with one of the firms to subsidise registrars)

**Dates:-** Either May 5,6&7 or 12,13&14 (Fly Thursday and Sunday).

**Abstracts:-** As soon as you like to Charles Wynn Jones ([chwj@doctors.org.uk](mailto:chwj@doctors.org.uk))

Please contact John Bradley or Charles or Hon Sec for further details if you wish.

## **CROSSBREEDS**

There has been a meeting of minds! Jon Hopper, Andy Crosbie and Jennifer Cooke (MRHA) met with representatives of ABHI including Mick Borroff (chair of ABHI), Neil Rushton, Prof. James Nixon and JKT. Attending were representatives of the MDU and the MPS. James' summary is as follows:-

- (i) A warning would be justified regarding the use of femoral components with a head component from a different manufacturer.
- (ii) This was a regulatory issue rather than a clinical issue.
- (iii) There was an element of consumer protection.
- (iv) It was not agreed that any form of alert or warning should be published in relation to the practice of crossbreeds at the moment.
- (v) It was agreed that the manufacturers would investigate the possibility of a separate information for use (IFU) document for acetabular and femoral components.

Helen Goodwin and Mark Dudley felt that there was a problem of possible clinical negligence rather than product liability, and where a surgeon knowingly inserted a device that was unsafe (a highly unlikely situation) then that would be indefensible. The MPS view was that informed consent was crucial in any procedure and there were issues around the Consumer Protection Act.

Basically it all means that there is to be more detailed discussion and more information obtained from the NJR to add to the published series of implant results from the various overseas registries.

## **BLOOD TRANSFUSION**

In the last year or two there has been increased emphasis on using less blood in primary THR. Simon Fletcher (Norwich) spoke at the Cardiff meeting, Peter Kay spoke last year at the Birmingham congress and we have received several abstracts for our meetings reporting good results of operating with fewer transfusions.

We have now been contacted by the National Blood transfusion Service who would like our co-operation in extending an audit into the incidence of transfusion in Primary THR James Nixon and myself have been co-operating with Fiona Regan, who writes:-

Last year, the National Blood Service (NBS) and Royal College of Physicians (RCP) undertook a national comparative audit looking at the safety aspects of giving a blood transfusion (eg: were patients wearing wristbands, were they monitored during transfusions etc). This year, we plan to undertake a national comparative audit of blood use in unilateral primary total hip replacement in collaboration with the British Hip Society.

It has been recognised that the use of blood varies widely among hospitals<sup>1</sup>. Blood transfusion is not risk free, as demonstrated in the UK annual Serious Hazards of Transfusion reports<sup>2</sup> and should not be given if not really required.

We will be writing to all hospitals in the UK very soon, inviting them to take part this autumn in a national comparative audit of blood use in 40 cases of unilateral primary total hip replacement in each hospital. We envisage that data collection would usually be done by the same personnel who undertook last year's audit, in which >70% of Trusts took part ie: by a Transfusion Specialist nurse, laboratory staff member or audit staff member, with all training, paperwork, support and data analysis being done by the RCP/NBS audit team.

We will feed back to each hospital their blood use in comparison with all other hospitals (anonymously) throughout the country, by the summer of 2005. Each hospital will be able to assess whether its usage is high compared with others, in the light of casemix factors eg: age, sex, BMI, pre-op Hb, use of cell salvage, blood-sparing drugs etc and with information on length of hospital stay. This will enable all hospitals to review their blood usage practice and consider if changes may be appropriate.

We would be very grateful if all orthopaedic surgeons who undertake primary hip replacement would be willing to participate. In the first instance, we have a number of hospitals whose haematologists wish their hospital to be a pilot site in the next month (including the Chelsea & Westminster Healthcare NHS Trust, the Oxford Radcliffe Hospitals Trust, the West Middlesex University Hospital NHS Trust and the Norfolk & Norwich University Hospital NHS Trust) and would be grateful if their orthopaedic colleagues would support this.

Yours sincerely,

Fiona Regan

Consultant Haematologist at National Blood Service, North London

(email: [fiona.regan@nbs.nhs.uk](mailto:fiona.regan@nbs.nhs.uk))

### References:

1. The SANGUIS Study Group. Use of blood products for elective surgery in 43 European hospitals. *Transfusion Medicine* 1994; 4: 251-268

2. Stainsby et al. *Serious Hazards of Transfusion Annual Report 2001-2002*; ISBN 0 9532 789 56 July 2003

### **ODEP**

The 10 year benchmark outcomes have been published and are on the web. Keith Tucker (Chairman) Andy Smallwood (PASA), Barrie Parker and Evert Smith are working on the 3, 5 and 7 year benchmarks. One of the problems is how we should deal with systems that are

marketed with multiple variations. Should there be multiple trials to show the efficacy of a whole system which includes, for example, ceramic, metal on metal and metal on plastic (with variations in the HDP, such as cross-linked), using the same outer acetabular shell and stem? We hope to have a short session on this important subject in Wrightington.

#### **COURSES INVOLVING HIP SURGERY**

We have been informed of the following courses:-

"Primary Hip Replacement" January 21<sup>st</sup> 2005 R.C.S. Eng.

"Revision Hip Surgery March 31<sup>st</sup>, April 1<sup>st</sup> 2005. R.C.S. Eng

Members are reminded that we are pleased to advertise their courses if they let us know about them.

Keith Tucker  
Hon. Sec. BHS  
August 2004.