

Periacetabular Osteotomy



Hip dysplasia is a condition where the hip socket is too shallow to support the femoral head and adequate function. This results in excessive forces on the cartilage and labrum resulting in damage to the structures of the hip socket. Hip dysplasia is a known condition that leads to early arthritis of the hip and considerable pain and dysfunction. Fortunately, procedures such as the periacetabular osteotomy have been developed to orient the hip socket and provide surface area for the femoral head to have contact with as well as stabilize the hip. This is a technically demanding procedure that requires four separate bone cuts around the hip socket in order to reorient the hip socket. The hip socket is then fixated into position.

Typical recovery is 6 weeks of 20% weight-bearing on the hip with a range of motion device in order to provide adequate motion to the hip as it heals. After the initial 6 weeks, the patient then progressed slowly to walking without crutches or assistive devices. After 3 months, if x-rays are adequate the patient can begin more aggressive strengthening and start to transition into impact activity and start return to sport training with typical return to sport around 4 to 5 months postoperative.

Dr. Zacharias is fellowship-trained to perform both the hip arthroscopy portion as well as the periacetabular osteotomy portion of the hip preservation. This unique training allows for the ability to treat a broad spectrum of hip pathology and provide an entire complement of procedures to tailor the best treatment plan for each individual patient. Given the complexity of this procedure, Dr. Zacharias works with Dr. Ben-Zev to perform the periacetabular osteotomy in a safe and efficient manner. Having 2 surgeons together for this type of procedure provides a safe and efficient team to execute this advanced surgery.