Session A – 12:22 – 12:29 pm

Mid- to Long-term Survivorship of HINTEGRA Total Ankle

Presenting:

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Summary:
Obviously, TAA using a current anatomic design of 3-component prosthesis (HINTEGRA) have evolved to a safe procedure with reliable results at mid- to long-term. These encouraging results support our belief that TAA has become a viable alternative to ankle arthrodesis even for younger patients and more difficult conditions, as often the case in posttraumatic osteoarthritis.

Introduction:
While encouraging short- to mod-term results of total ankle arthroplasty (TAA) with current three-component designs have been reported, little is known about the survivorship at mid-term to long-term. The aim of this study was to determine the survivorship of TAA with the use of the HINTEGRA ankle in a consecutive series of 470 primary TAA.

Methods:
Between 05/2000 and 12/2007, 470 primary TAA were performed in 448 patients (females, 224; males, 246, age 60.3 ± 12.6 years). Underlying diagnosis was posttraumatic osteoarthritis in 359 ankles, primary osteoarthritis in 49 ankles and inflammatory arthritis in 62 ankles. All patients were clinically and radiologically assessed after 39.5 ± 20.4 (12.1 – 95.7) months, and survivorship analysis was calculated. Revision of a metallic implant or conversion into ankle arthrodesis was taken as the endpoint.

Results:
At the latest follow-up 427 patients were well or moderately satisfied. 92.5 of all patients would choose this procedure again. The AOFAS score improved from 42 preoperatively to 72 postoperatively. We observed significant pain relief from 6.8 ± 1.9 to 2.8 ± 2.4 (VAS). Nine ankles were revised to TAA (component loosening, 8; pain, 1), and 2 ankles (component loosening and recurrent misalignment, 1; pain, 1) were revised to ankle arthrodesis. Overall survivorship at 5 years was 95.4%.

Conclusion:
Obviously, TAA using a current anatomic design of 3-component prosthesis (HINTEGRA) have evolved to a safe procedure with reliable results at mid- to long-term. These encouraging results support our belief that TAA has become a viable alternative to ankle arthrodesis even for younger patients and more difficult conditions, as often the case in posttraumatic osteoarthritis.