# Innovative Treatments for Hip & Knee Arthritis

# Erik Bowman, MD BoulderCentre for Orthopedics & Spine 720-370-7853









 Please check out other videos at https://www.bouldercentre.com/doctors/erik-c-bowman-md







- These are my opinions on technology and implants where data is not presented.
- I have no royalties, personal or family connections to technology or companies presented.







- Joint Reconstruction fellowship Louisville, KY
  - Trained by Dr. Arthur Malkani designer of Stryker Accolade, one of the highest consulted surgeons for Stryker and MAKO robotic surgery
  - 500+ cases in revision hip and knee surgery and MAKO
- Residency Omaha, Nebraska
  - Trained by Dr. Kevin Garvin 2019 president of the Hip Society
  - 18 months/60 months of training in joint reconstruction (20 weeks for most residency programs)





- Have you ever been diagnosed or thought you have arthritis?
- How many people do you know who have had a knee or hip replacement?



#### Prevalence



- Over 54.4 million Americans have some form of arthritis
- More than 450,000 total hip replacements
- Nearly 1,000,000 total knee replacements
- Even in dogs!



#### Ancient Treatments



- Arthritis was caused by an imbalance of the 4 humors
  - Elixirs
  - Blood letting
  - Herbal medicines
  - Mineral water
- Demons and gods
  - Prayer
  - Precious metals
  - Good behavior
  - Tithes
- Egyptians
  - Fat, oil, honey, bone marrow



## Historical Scientific Treatment



- Hippocrates treated with willow bark (salicin).
  - Cold water therapy
- Dioscorides recommended ivy.
- Chinese used acupuncture.
- 1850s salicylic acid (aspirin) was synthesized.
- Late 1800s Payne used quinine to treat rheumatoid disease.
- 1950s corticosteroids were introduced for treatment of arthritis.



## Joint Surgery



- In 1826, John Rhea Barton performed an osteotomy for pain relief for an arthritic fused hip.
- He also advocated for osteotomy of the knee as well.



#### Early Implants



- In 1891, Professor Gluck presented femoral head replacements with ivory for patients whose hip joints were destroyed by tuberculosis.
  - Fixed with nickel plated screws, Plaster of Paris, and powdered pumice with resin









Peter Ring from Surrey, developed a cementless MoM designed for selflocking.







Sivash 1960's developed the first fixed fulcrum with a c.c. head/cup with a titanium stem.

Sivash, Russin & Noiles 1970's improved the design that eventually led to the S- Rom® Stem





#### Modern Treatment



- Life Style Modifications
- Medications
- Therapy
- Bracing
- Injections
- Surgery





## Life Style Modifications



- Healthy Weight
  - BMI > 30
    - Women 4x and Men 5x greater risk of joint arthritis
  - 6-9 times more force (weight) in knee and hip joint
- Exercise
  - Aerobic exercise
  - Low-impact
  - Balanced strength



# Diet and Supplements

Boulder Community Health

- Low-inflammatory diet
  - Very low level evidence
  - Meta analysis did not improve function, general health or joint pain
- Turmeric
  - Limited evidence
  - Systematic study showed some benefit
  - High levels
  - Gl upset
- Glucosamine and chondroitin
  - 2018 small, but non statistical difference compared to placebo
  - 2022 meta analysis no difference
  - AAOS strongly recommend against use
- CBD
  - Small and level 4 evidence
- Collagen
  - Small, short (1 month), poor quality

![](_page_13_Picture_18.jpeg)

![](_page_13_Picture_19.jpeg)

#### Medications

![](_page_14_Picture_1.jpeg)

- Tylenol (acetaminophen)
  - Weak evidence for pain relief
  - Very long term liver
- Non specific NSAIDs (Advil, Motrin, Aleve, ibuprofen, naproxen)
  - Moderate evidence for pain relief
  - Side effects of GI problems
  - Serious kidney, ulcer, bleeding
  - Judicious use, short term (month)
  - Voltaren (diclofenac) cream
    - Limited evidence, less side effects
- Cox-1 Inhibitors (Celebrex, celecoxib)
  - Moderate
  - Less GI side effects
  - Sister drug rofecoxib pulled off market due to heart thrombosis
- Tramadol
  - Opioid-like medication
  - Slight addiction
  - Less common constipation, nausea

![](_page_14_Picture_20.jpeg)

![](_page_14_Picture_21.jpeg)

## Disease Modifying Drugs

![](_page_15_Picture_1.jpeg)

- Anti-cytokine
  - Tanezumab
  - AMG 108
  - Adalimumab
- Enzyme Inhibitors
  - M6495
  - Cindunistat
- Growth factors
  - Bone Morphogenic Protein-7
  - Sprifermin
- Gene Therapy
  - Micro RNA
- Peptides
  - Calcitonin
- Others
  - SM04690
  - Lorecivivint

![](_page_15_Picture_19.jpeg)

#### Therapies

![](_page_16_Picture_1.jpeg)

- Physical therapy
  - Muscular balance
  - Neuromuscular control
- Hydrotherapy
  - Reduces weight bearing
- Stretching
  - Improve range of motion
  - Can make pain worse
- Chiropractic therapy
  - Temporary relief
- Acupuncture
  - Temporary pain relief

![](_page_16_Picture_14.jpeg)

## Bracing

- Supportive sleeves
  - Neoprene
- Off-loader brace
  - Bulky
  - Expensive
  - Only used with correctable deformities
  - Uncomfortable

![](_page_17_Picture_8.jpeg)

![](_page_17_Picture_9.jpeg)

![](_page_18_Picture_0.jpeg)

- Corticosteroids
- Visco-supplementation
- Platelet rich plasma (PRP)
- Stem Cells

![](_page_18_Picture_5.jpeg)

### Corticosteroids

- Conventional (methylprednisone, triamcinolone)
- Long-acting (Zilretta)
  - Lipase-activated release of triamcinolone
- Reduces inflammation
- Pros
  - Cheap and effective
- Cons
  - Multiple injections in short period or over many years can lead to damage
  - Every 3-4 months
  - Increase blood sugar in diabetics
  - Zilretta needs insurance approval

![](_page_19_Picture_12.jpeg)

Boulder Community Health

## Visco-supplementation

![](_page_20_Picture_1.jpeg)

- Hyaluronic acid ("chicken shot", gel injection)
- "Try to "mimic" cartilage and lubrication
- Avian vs synthetic
- Pros
  - Non-toxic
- Cons
  - Need some cartilage left
  - Expensive
  - Multiple injections
  - Insurance approval

![](_page_20_Picture_12.jpeg)

#### PRP: Platelet Rich Plasma

![](_page_21_Picture_1.jpeg)

- Injections of concentrated blood products to enhance healing
- Cannot heal irreversible changes
- OOPC > \$800 per injection

![](_page_21_Picture_5.jpeg)

![](_page_21_Picture_6.jpeg)

#### Stem Cells

![](_page_22_Picture_1.jpeg)

- Obtain stem cells, concentrate them and inject them into the joint to decrease inflammation and promote healing
- How do they know what to turn into?
- OOPC > \$5,000

![](_page_22_Figure_5.jpeg)

## Surgical Advancements

![](_page_23_Picture_1.jpeg)

- Technique
- Technology
  - Navigation
  - Artificial Intelligence
  - Augmented Reality
  - Robotics

![](_page_23_Picture_8.jpeg)

# Direct Anterior Hip Replacement

![](_page_24_Picture_1.jpeg)

#### **Traditional Hip Replacement**

- 8-12 inch incision
- Surgical approach side (lateral) or back (posterior)
- Disturbance of the joint and connecting tissues
- Easier
- Longer recovery

#### MIS with Direct Anterior Approach

- 4-5 inch incision
- Surgical approach front (anterior)
- Muscles or tendons not detached
- Heavy learning curve
- Higher risk of complications

![](_page_24_Picture_14.jpeg)

## Computer-assisted Navigation

Boulder Community Health

- At least 20 different navigation systems worldwide
- Vary from hand held devices to full computer supported structure
- Advantages
  - Cheaper
  - Can be used with any implant system
  - Pre-operative imaging may not be required
- Disadvantages
  - Learning curve
  - Inconsistent
  - Some do not help prior to surgical steps
  - Not all navigation systems are equal
  - Do not make the surgery safer
  - Up to 20 minutes longer surgery

![](_page_25_Picture_15.jpeg)

![](_page_25_Picture_16.jpeg)

![](_page_25_Picture_17.jpeg)

# Patient-Specific Instrumentation

![](_page_26_Picture_1.jpeg)

- Personalized instrumentation that is unique to the patient
- Advantages
  - All planning is done before surgery
  - Can customized it to your anatomy and arthritis
  - Theoretically decreases surgical time
  - 3D printed body part to help with implant position
  - Can be disposable and less instruments on the table
- Disadvantages
  - MRI or CT currently required
  - Cutting guides may break
  - Very finnicky
  - Can still make an error
  - Personal cutting guides expensive

![](_page_26_Picture_15.jpeg)

![](_page_26_Picture_16.jpeg)

#### Robotics

![](_page_27_Picture_1.jpeg)

- Four "Robots"
  - ROSA
  - NAVIO
  - VELYS
  - MAKO

![](_page_27_Picture_7.jpeg)

![](_page_27_Picture_8.jpeg)

![](_page_27_Picture_9.jpeg)

#### ROSA – Zimmer Biomet

![](_page_28_Picture_1.jpeg)

- Advantages
  - Implant allows cementless
  - 3 implant designs for knees
  - X-ray based
- Disadvantages
  - Uses conventional cutting guides
  - Can only be used for knees
  - No haptic feedback
  - No boundaries

![](_page_28_Picture_11.jpeg)

#### NAVIO – Smith and Nephew

![](_page_29_Picture_1.jpeg)

- Advantages
  - No prior imaging needed
  - Implant can be used for Nickel allergy\*
  - Less expensive
  - Dynamic balancing
- Disadvantages
  - Longer surgery
  - No cementless option
  - No haptic feedback
  - Only for knee joint

![](_page_29_Picture_12.jpeg)

![](_page_29_Picture_13.jpeg)

![](_page_29_Figure_14.jpeg)

## VELYS - Depuy

![](_page_30_Picture_1.jpeg)

- Advantages
  - No prior imaging needed
  - Robotic arm is less expesnive
  - Robotic arm highly transportable
  - Dynamic balancing
  - Haptic feedback
- Disadvantages
  - Only for knee joint

![](_page_30_Picture_10.jpeg)

![](_page_30_Picture_11.jpeg)

## MAKO - Stryker

![](_page_31_Picture_1.jpeg)

- Advantages
  - Pre-operative planning
    - Already know your sizes before surgery
  - Haptic feedback and boundaries
  - Longest track record
  - Hip, knee, and unicompartmental
  - Extremely efficient
- Disadvantages
  - Bulky
  - Requires CT
  - Expensive

![](_page_31_Picture_13.jpeg)

![](_page_32_Picture_0.jpeg)

![](_page_32_Picture_1.jpeg)

![](_page_33_Picture_0.jpeg)

![](_page_33_Picture_1.jpeg)

![](_page_34_Picture_0.jpeg)

![](_page_34_Figure_1.jpeg)

![](_page_35_Picture_0.jpeg)

![](_page_35_Picture_1.jpeg)

![](_page_36_Picture_0.jpeg)

![](_page_36_Figure_1.jpeg)

![](_page_37_Picture_0.jpeg)

![](_page_37_Figure_1.jpeg)

![](_page_38_Picture_0.jpeg)

![](_page_38_Picture_1.jpeg)

![](_page_38_Picture_2.jpeg)

![](_page_39_Picture_0.jpeg)

![](_page_39_Picture_1.jpeg)

![](_page_40_Picture_0.jpeg)

![](_page_40_Picture_1.jpeg)

![](_page_40_Picture_2.jpeg)

#### Examples

![](_page_41_Picture_1.jpeg)

![](_page_41_Picture_2.jpeg)

![](_page_42_Picture_0.jpeg)

![](_page_42_Picture_1.jpeg)

![](_page_42_Picture_2.jpeg)

![](_page_43_Picture_0.jpeg)

![](_page_43_Picture_1.jpeg)

![](_page_43_Picture_2.jpeg)

![](_page_44_Picture_0.jpeg)

![](_page_44_Picture_1.jpeg)

#### Questions

![](_page_45_Picture_1.jpeg)

![](_page_45_Picture_2.jpeg)

#### Sources

![](_page_46_Picture_1.jpeg)

- Knight SR, Aujla R, Biswas SP. Total Hip Arthroplasty over 100 years of operative history. Orthop Rev (Pavia) 2011 Sept 6; 3(2): e16.
- Moll JMH, Chesterman PJ, Meanock RI, Andrews FM. Walldius Arthroplasty of the Knee: Follow up study of 51 operations. Ann. Rheum. Dis. (1973), 32, 397.
- Insall JN, Clarke HD. Historic Development, Classification, and Characteristics of Knee Prostheses. Muscloskeletal Key. Ch 97.
- <u>https://archaeologynewsnetwork.blogspot.com/2016/05/arthritis-brought-ancient-romans-to.html</u>
- Goldberg, Cary. <a href="https://www.wbur.org/commonhealth/2017/08/14/skeleton-study-arthritis-harvard">https://www.wbur.org/commonhealth/2017/08/14/skeleton-study-arthritis-harvard</a>
- Power, D. Ipsssima Verba. Brit Jour Sur. Vol. XXIV No 94 October 1936.
- Matteo BD, Tarabella V, Maracacci M. John Rhea Barton: the birth of osteotomy. Knee Surg Sports Traumatol Arthrosc. 2013 Sep: 21(9): 1957-1962. Epub 2013 Jan 19.
- Hernigou P. Smith-Petersen and Early Development of Hip Arthroplasty. International Orthopaedics 38, 193-198(2014). 6 Sept 2013
- Lachiewicz PF, Henderson RA. Patient-Specific Instruements for Total Knee Arthroplasty. Journal of the American Academy of Orthopaedic Surgeons: September 2013- Vol 21 (9).
- Karkenny AJ, Mendelis JR, Geller DS, Gomez JA. The Role of Intraoperative Navigation in Orthopeadic Surgery. Journal of the American Academy of Orthopaedic Surgeons: October 1, 2019. Vol 27(19).
- <u>https://orthoinfo.aaos.org/en/treatment/revision-total-hip-replacement/</u>
- <u>https://www.columbian.com/news/2015/sep/28/technology-improves-surgical-accuracy/</u>
- https://www.orthosensor.com/surgeons/verasense/
- Stryker MedEd
- Johnson and Johnson Depuy
- <u>https://www.hopkinsarthritis.org/patient-corner/disease-management/role-of-body-weight-in-osteoarthritis/#:~:text=Overweight%20women%20have%20nearly%204,or%20obesity%20and%20knee%20OA.</u>
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7503186/
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7812094/

![](_page_46_Picture_20.jpeg)

# Innovative Treatments for Hip & Knee Arthritis

# Erik Bowman, MD BoulderCentre for Orthopedics & Spine 720-370-7853

![](_page_47_Picture_2.jpeg)

![](_page_47_Picture_3.jpeg)