ABSTRACT

Background: Hip arthroscopy is a common surgical technique for the correction of intraarticular pathology. While surgical success is often determined by anatomical correction, post-operative rehabilitation serves an essential role in restoring pre-morbid activity levels. A paucity of long-term post-operative rehabilitation outcomes exists in the literature lending uncertainty to the long-standing efficacy of interventions and associated risk for future injury.

Case Description: This case report describes the progress of a male subject 3.6 years after left hip arthroscopy with labral repair. Detailed clinical measures and insight into potential risk factors are presented as a follow-up to a previously published case report.

Outcome: A 3.6-year follow-up assessment revealed potential risk factors that may have predisposed the subject to future pathology. The most profound finding was the subject's complaint of contralateral right hip pain and examination findings suggesting intraarticular pathology. His left surgical hip presented with no reported problems or significant findings. The examination also revealed an anterior tilted pelvis, muscle length deficits, and hip muscle weakness which may have contributed to his right hip pain or may be risk factors for future pathology in both hips. It appeared that these impairments affected his gait and performance on functional tests.

Discussion: This case report describes the 3.6 year follow-up for a young adult male subject after unilateral left hip arthroscopy and acetabular labral repair. The re-examination findings and risk factors identified at the follow-up may provide insight into the need for long-term surveillance among post-surgical individuals. Detailed reporting of the long-term effects of a post-operative program after hip arthroscopy is non-existent in the literature and the current findings suggest the potential need for mitigating risk in the non-surgical hip. Future longitudinal studies are needed to develop a consensus on the best interventions for these patients.

Keywords: Femoral acetabular impingement; hip; impingement

Level of Evidence: 4-Case Report