

Reducing the risk of early femoral failure after metal-on-metal hip resurfacing arthroplasty

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Abstract

This study included 96 consecutive cases with a dual-energy X-ray absorptiometry scan *T* score lower than -1.5 who were operated on between September 2006 and December 2009. The control group, without treatment of alendronate, included consecutive 42 cases. The study group, treated with alendronate (for 1 year) as well as a “slowed down” weight-bearing protocol, included the consecutive 54 cases. Otherwise, treatment was the same for both groups. There were four early femoral failures in the control group: two due to femoral neck fractures and two due to early femoral head collapse. There were no early femoral failures in the study group. This study demonstrates that treating high-risk patients who have a low bone density with a 1-year regimen of alendronate and a slowed down weight-bearing protocol can significantly reduce the risk of early femoral failure in hip resurfacing.