

Hip Resurfacing

The BHR Hip

The BIRMINGHAM HIP◇ Resurfacing System (BHR◇) is the global market leading hip resurfacing system with over 125,000 implantations worldwide. Introduced in 1997, the BIRMINGHAM HIP◇ Resurfacing System was designed using knowledge gained from first generation metal-on-metal total hips and a thorough understanding of hip resurfacing principles. This successful, bone conserving total hip system is well documented through independent clinical and laboratory studies. Additional clinical evidence supporting the BIRMINGHAM HIP◇ Resurfacing System is published in multiple registries. This bone conserving procedure, combined with the virtual elimination of dislocation and excellent survivorship make the BIRMINGHAM HIP◇ Resurfacing ideal for the active informed patient.

BHR◇ Clinical History

There have been many dramatic changes in the evolution of the orthopaedic hip device sector since the earliest total hip replacement surgery in the 1930s.

The first total hip replacement surgery was performed by Phillip Wiles who designed and placed the very first hip replacements at Middlesex Hospital, London, UK. Prior to Phillip Wiles successful design, only hemi-arthroplasty hip surgeries were performed with poor clinical results.

Since then, several passionate and well-known surgeons have sought to improve the clinical history of hip replacement surgeries with unique design changes, revolutionary surgical procedures and innovative and standard materials.

George Kenneth McKee developed the first widely accepted and successful metal-on-metal THR in the 1960s which was heavily criticized by Professor Sir John Charnley. By the late 1970s, usage of metal-on-metal hip devices was replaced by metal-on-polyethylene.

It was discovered in the late 1980s that the metal-on-polyethylene replacements were failing at a high rate due to osteolysis from polyethylene debris being created by the friction of the metal head articulating inside of the polyethylene cup. The Charnley Method was developed to ensure that the metal-on-polyethylene devices were used in the 65+ age population because their activity levels weren't as high and likely to cause osteolysis. For the elderly, inactive segment, the metal-on-polyethylene hip designs yield favorable clinical results with very little osteolysis disease.

But what about the younger, more active patients under 65? For years, they were told to endure the pain and limitations of hip disease, until they reached the "magic age" of 65. Until the late 1990s.

Through decades of trial and error the age of the most successful large-head metal-on-metal BIRMINGHAM HIP◇ Resurfacing design was born.

FAQs

1. Since the BIRMINGHAM HIP◇ Resurfacing implant is new in the United States, is it clinically proven?

Answer: While the BIRMINGHAM HIP◇ Resurfacing implant is new to the United States, it is not a new implant or technique. It has been in use worldwide since 1997, and the US Food and Drug Administration reviewed a tremendous amount of resulting clinical data before approving it for use in this country.

2. Who is a candidate for the BIRMINGHAM HIP◇ Resurfacing System?

Answer: The typical patient will be physically active, under 60 years of age, and suffering from hip arthritis, hip dysplasia or avascular necrosis of the hip. The implant can be used in patients over 60 whose bone quality is strong enough to support the implant. Your surgeon will make the determination if you are a candidate for hip resurfacing.

3. How long will the BIRMINGHAM HIP◇ Resurfacing implant last?

Answer: It is impossible to say how long your implant will last because so many factors play into the lifespan of an implant. In the case of resurfacing, for instance, the metal-on-metal bearing surfaces of your new joint may extend its life longer than that of a traditional total hip replacement, but failure to comply with your physical rehabilitation regime may cause your implant to fail within months. A clinical study showed the BIRMINGHAM HIP◇ Resurfacing implant had a survivorship of 95.4% at the 10 year mark, which is comparable with the survivorship of a traditional total hip replacement in the under-60 age group, and 98.6% are pleased to extremely satisfied with BHR. ¹

¹Minimum 10 Year Outcome of Birmingham Hip Resurfacing (BHR)

4. How long will the scar be?

Answer: Your surgeon will use an incision of between six and eight inches in length. While some surgeons may use a slightly smaller incision, most will fall in that range.

5. What are the physical limitations after surgery?

Answer: Most surgeons will tell you that after the first year, you can return to whatever physical activity you enjoyed before hip pain limited your mobility. For instance, unlike total hip replacement, you will be able to return to jogging or singles tennis after your first year after surgery. During your first year, more conservative, low-impact activities like walking, swimming and bicycling are recommended for strengthening your femoral neck and the muscles around your resurfaced joint.

6. How can I receive more information about hip resurfacing and the BIRMINGHAM HIP◇ implant?

Answer: Ask your surgeon for BIRMINGHAM HIP◇ Resurfacing System patient information.