Can Viscosupplementation Be Used in the Hip?

To the Editor:

I commend the author of “Can Viscosupplementation Be Used in the Hip? An Italian Perspective” on providing a well-written review article that informs readers about the expanding use of viscosupplementation.

However, I disagree with the author when he states on page 50 that, “Although no study has been conducted of the variability in the efficacy of intra-articular hyaluronic acid infiltration therapy in the hip compared with the gravity of the arthritis in the treated joint, it can reasonably be assumed, as in the case of knee joint arthritis, that the possibilities of efficacy and duration of the beneficial effects of the treatment are inversely proportional to the gravity of the disease.” My colleagues and I conducted a retrospective review in which we showed that viscosupplementation was effective in 58% of cases of advanced arthritis of the knee.3 I would appreciate the author’s response regarding this.

Ashish Anand, MD
Marksville, Louisiana

The author has no relevant financial relationships to disclose.

References

Reply:

I thank Dr Anand for his comments. I read with interest his article.1 Despite his favorable results in cases of advanced arthritis, several reports and guidelines discourage widespread use of hyaluronic acid.2-4 Evanich et al5 reported increased activity in 30% of cases of radiographic grade III and 0% of cases of radiographic grade IV, suggesting that “it is inadvisable to treat patients with a complete collapse of joint space or bone loss with intra-articular hyaluronic acid, given their poor clinical response.” Moreover, the latest revision of the American Academy of Orthopaedic Surgeons clinical practice guideline6 does not recommend using hyaluronic acid for patients with symptomatic osteoarthritis of the knee.

The debate regarding indications for hyaluronic treatment continues. I think it is necessary to carefully select patients for treatment. Hyaluronic treatment should be discouraged for patients with a high radiographic degree of arthritis.

Fabrizio Rivera, MD
Savigliano, Italy

The author has no relevant financial relationships to disclose.

References

doi: 10.3928/01477447-20140401-02