



A Novel Technique that Avoided an Open Reduction for a Dislocated Cemented Total Hip Replacement

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Clinical Image

A 79-year-old lady presented to our Orthopedic Department with a posterior dislocation of her Charnley cemented left total hip replacement. She underwent a closed Manipulation under Anesthesia (MUA). A standard closed reduction technique was used to reduce the hip. Intra-operative images showed a piece of cement in the socket that was stopping congruent reduction of the hip joint. The patient was gently turned to her left lateral position to dislodge the cement piece from the socket using gravity. Repeat images in the supine position showed that the cement piece had dislodged from the socket and the hip reduced (Figure 1). This technique (Gravity Maneuver) avoided an open reduction of the hip joint. Lateral thinking was crucial in this case.

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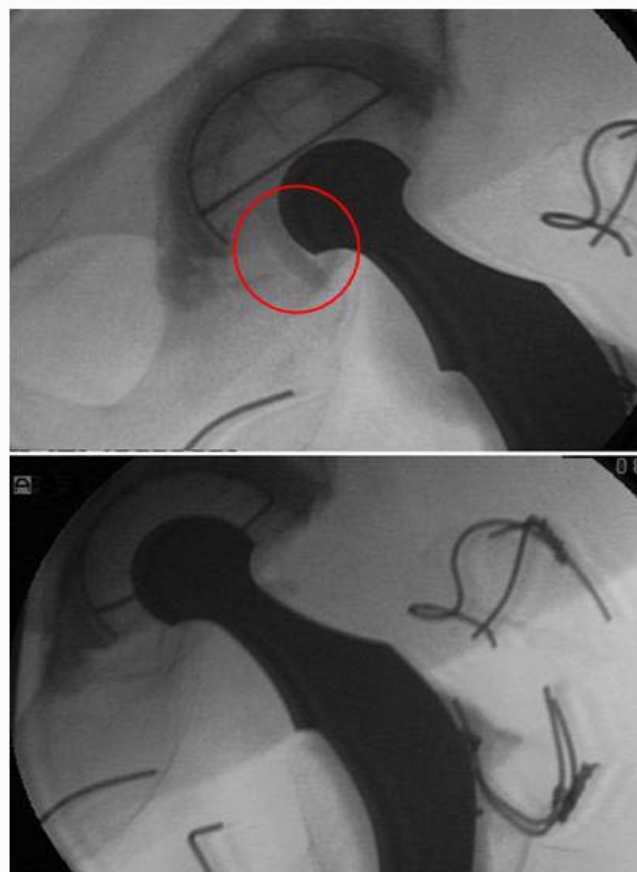


Figure 1: The radiograph showing a piece of cement (circled red) in the socket preventing concentric reduction and subsequently a concentric reduction post 'Gravity Maneuver' to dislodge the cement piece.