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Titolo	Hip Dysplasia : Understanding and Treating Instability of the Native Hip // edited by Paul E. Beaulé
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ISBN	3-030-33358-2
Edizione	[1st ed. 2020.]
Descrizione fisica	1 online resource (XVI, 241 p. 99 illus., 68 illus. in color.)
Disciplina	617.376 617.581059
Soggetti	Orthopedics Sports medicine Sports Medicine
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Includes index.
Nota di contenuto	Etiology of Hip Dysplasia -- Natural History of Residual Hip Dysplasia -- Anatomical Description-Classification of Hip Dysplasia -- Pathomechanics of the Dysplastic Hip -- Biomechanics of the Native Hip from Normal to Instability -- Traditional Imaging -- Advancing Imaging of the Hip -- Non-Surgical Management of Pre-Arthritic Dysplastic Hip Pain -- Adjuvant Therapies in the Treatment of Pre- Arthritic Hip Disease -- Role and Indications of Hip Arthroscopy for Hip Dysplasia -- Proximal Femoral Osteotomy -- The Periacetabular Osteotomy -- Other Pelvic Osteotomies -- Joint Replacement in the Dysplastic Patient.
Sommario/riassunto	This book represents the most advanced understanding of diagnosis and management of hip dysplasia in the young adult, written by the world's leading experts and covering advanced imaging and biomechanical studies as well as latest surgical techniques. This is especially timely, as the field of hip preservation surgery is in constant evolution, and it is critical that surgeons and researchers combine their efforts to provide the best evidence-based knowledge to all health care providers evaluating and treating patients suffering from pre-arthritic hip pain. Not only does this book discuss the most up-to-date information on the etiology and natural history of hip dysplasia, as well

as pathomechanics and traditional and advanced imaging, it also presents new conceptions of its classification and subsequent management. The focus throughout the book is that hip dysplasia is a problem of instability, where both the bony structure and the soft tissue envelope (i.e., capsule, ligaments and muscles) are at play. Moreover, although corrective osteotomies such as the peri-acetabular osteotomy will remain the dominant treatment option, non-surgical treatments as well as hip arthroscopy are now being increasingly recognized as useful adjuncts in order for our patients to return to their desired activities. Finally, as the longevity of joint replacement surgery has improved dramatically, this should be strongly considered in cases where the outcome of joint preserving surgery is not as predictable. Orthopedic surgeons, sports medicine physicians, physiatrists and physiotherapists alike will find this book a valuable resource when treating the young adult with symptomatic hip dysplasia.

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