

# The Lifetime Revision Risk of Unicompartamental Knee Arthroplasty



MEDICAL AND HEALTH SCIENCES

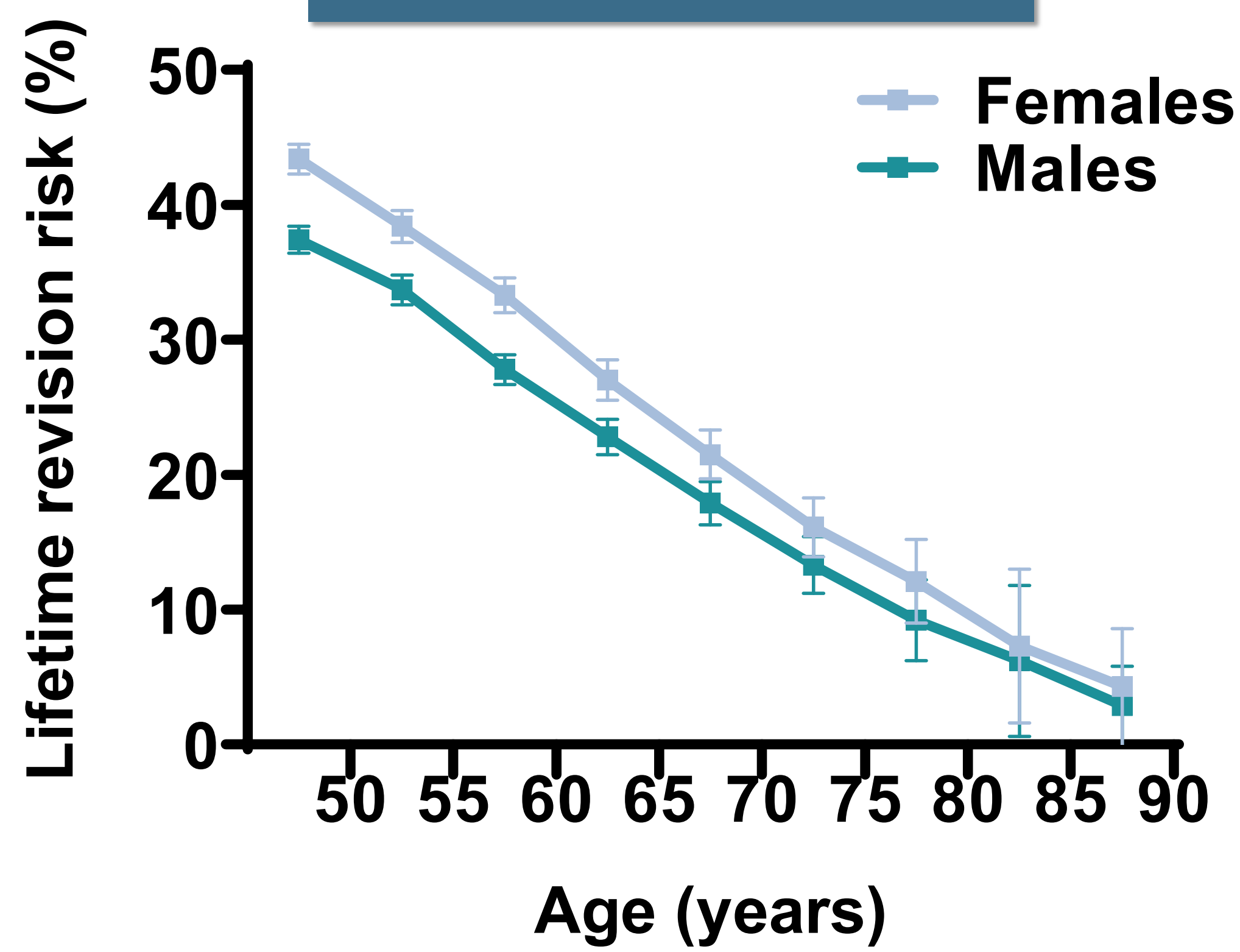
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**Aim:** To calculate the revision risk of unicompartamental knee arthroplasty (UKA) over a patient's lifetime as a more relatable and easier to understand metric

**Patients:** All primary UKAs performed between 1999 and 2019 captured by the New Zealand Joint Registry (n=13,481)

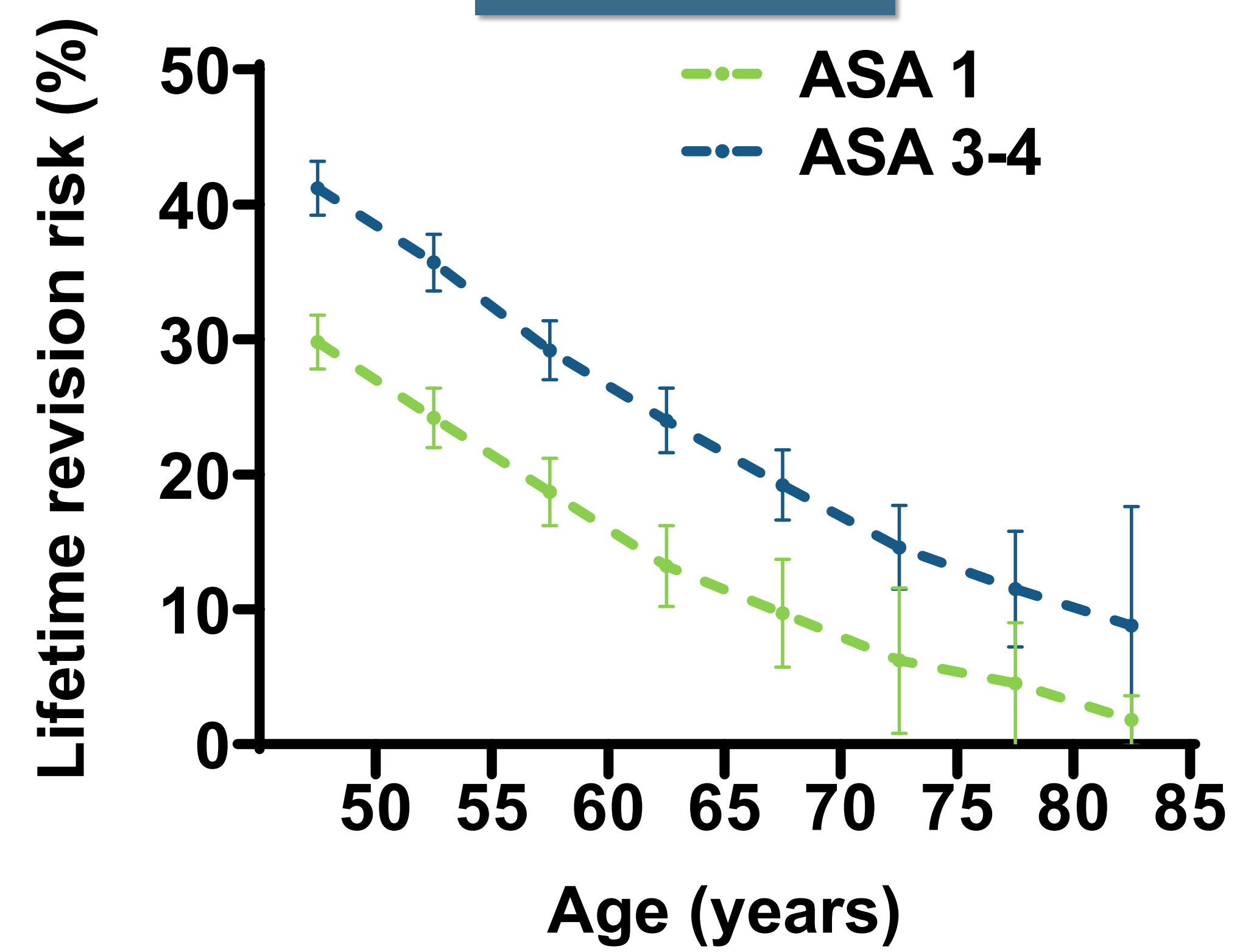
## Age, Gender



Younger patients and females have higher risk of revision

- Under 50: 40.4% vs. over 85: 3.7%
- Females 4-43% vs. males 3-37%

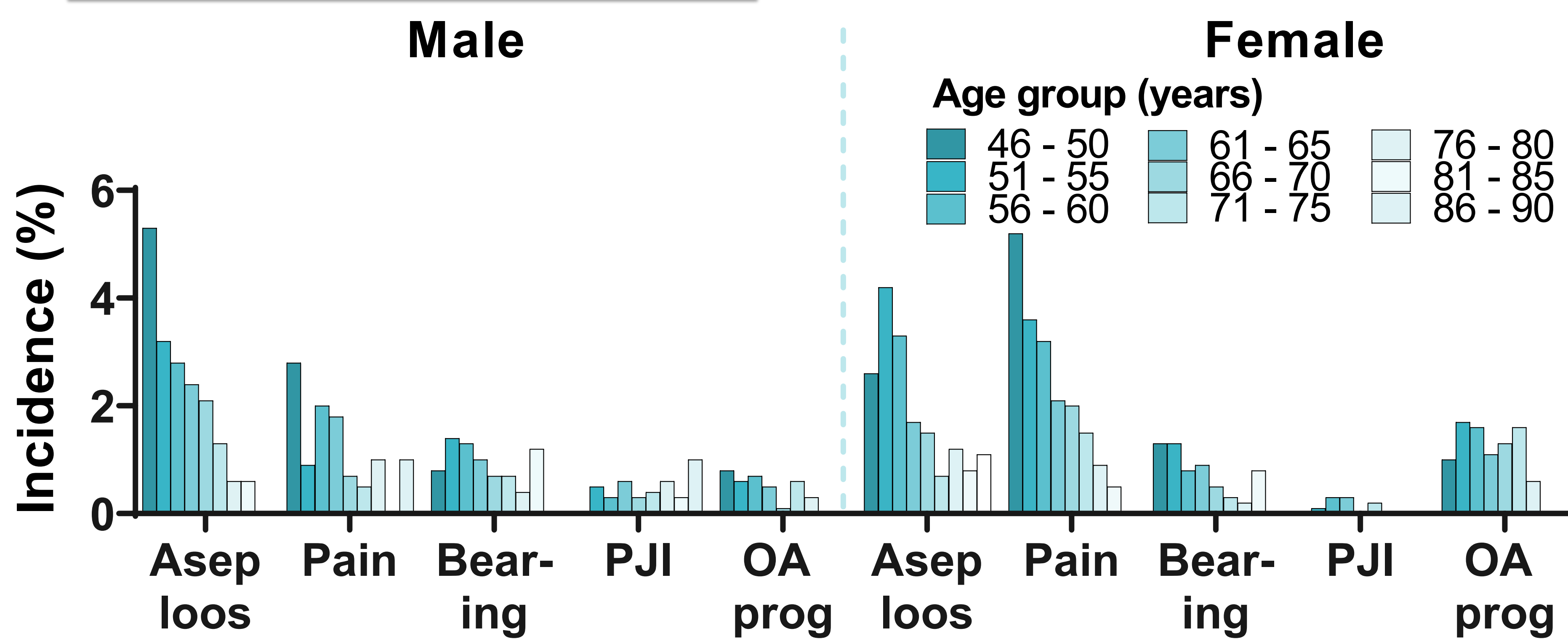
## ASA



Patients with higher ASA status had higher risk of revision

- ASA 3&4: 41% vs. ASA 1: 2-28%

## Reasons for revision

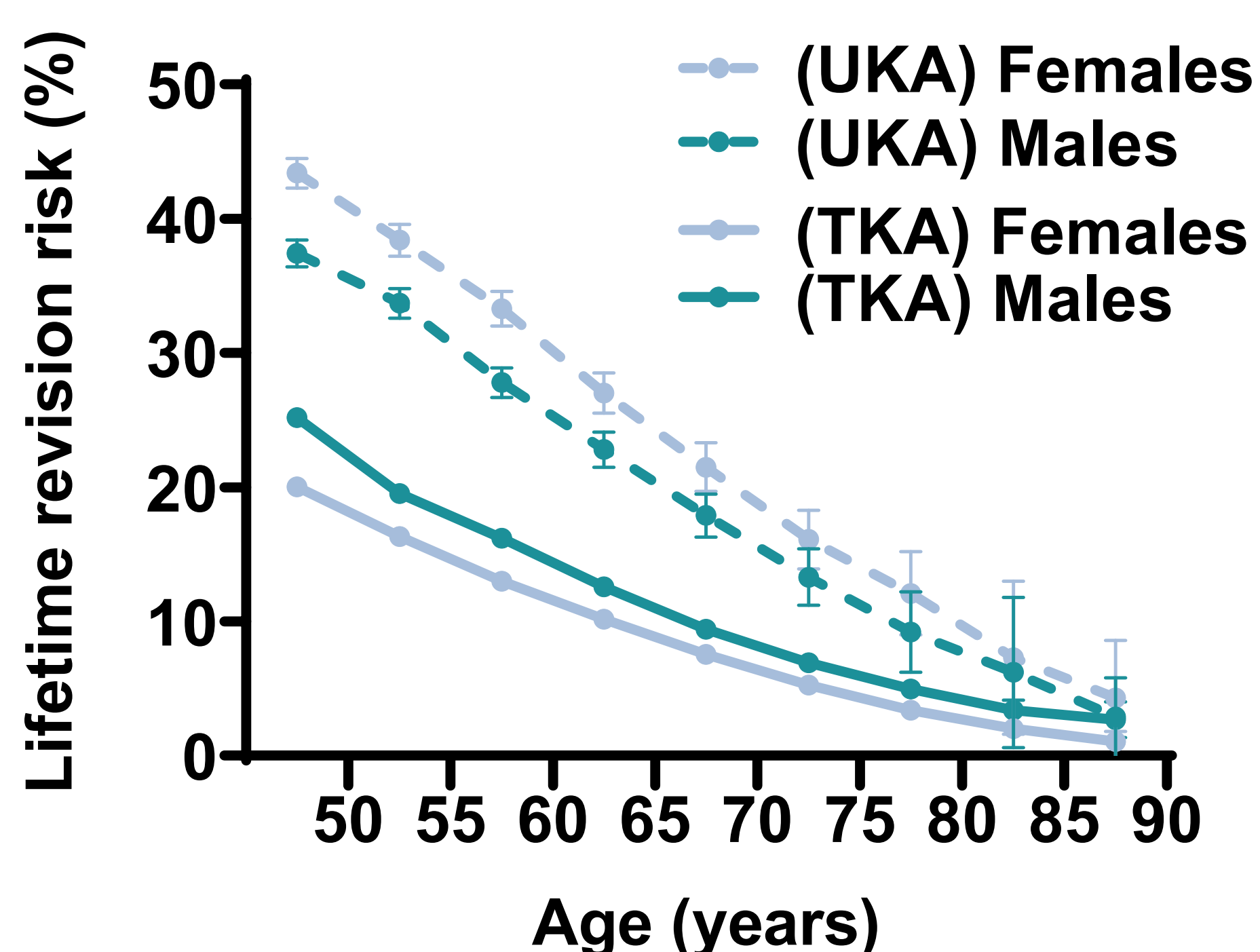


Higher risk of revision for females may be associated with higher incidence of pain

- Females: 2.3% vs. males 1.2%

ASA, American Society of Anesthesiologist status; *asep loos*, aseptic loosening; *bearing*, bearing dislocation; *OA prog*, osteoarthritis progression; *PJI*, periprosthetic joint infection

## Comparisons to total knee arthroplasty (TKA)



Lifetime risk of UKA revision was two-fold higher than TKA  
UKA 40% vs. TKA 22%

Males have higher risk for TKA  
3-25% vs. females 1-20%  
whereas females have higher risk for UKA  
4-43% vs. males 3-37%

## Conclusions

- The lifetime risk of UKA revision is higher for younger patients, females, and those with higher ASA status
- Lifetime risk of UKA revision was two-fold higher than TKA; the biggest difference was for young females