
Presented at 14th EFFORT Congress, Istanbul, 5-8 June 2013

Further information on conference website:

http://www.efort.org/istanbul2013/

**Date deposited:** 23rd July 2013

This work is licensed under a [Creative Commons Attribution-NonCommercial 3.0 Unported License](http://creativecommons.org/licenses/by-nc/3.0/)

**ePrints – Newcastle University ePrints**

http://eprint.ncl.ac.uk
**Background**

The DePuy Articular Surface Replacement (ASR) metal-on-metal hip was withdrawn in both its resurfacing and total hip replacement forms in August 2010 after around 100,000 were implanted worldwide. Registry data show the implant failing in catastrophic numbers: the 2012 National Joint Registry for England and Wales reports revision rates of 24% at 7 years for the ASR resurfacing and 22% at 5 years for the ASR total hip replacement version [1]. Wear of ASR hips in vivo has led to Adverse Reactions to Metal Debris (ARMD) and attendant health problems in patients [2]. While these are reported in mainstream media, they remain sparsely documented in any official or academic sense. This project aims to document and disseminate the experiences of patients in a systematic manner.

**Methodology**

36 ASR hip patients and family members took part in 3 focus groups designed to explore issues around systems, regulation and medical care. Participants were asked, who do you think is responsible for what has happened with metal-on-metal hips? Who should be responsible for ensuring this does not happen again? How has this affected your trust in medicine? In addition an ongoing, on-line questionnaire, about health problems caused by the patients’ implant failures and the knock on effects on social, work and family life, has been completed by 148 patients from 14 countries.

**ARMD – Indications**

Metallosis around joint – pain, pseudotumour, necrosis

Effects of metal ions in bloodstream - hearing loss, dizziness, decline in cognitive function, ‘symptoms consistent with a stroke’, cardiomyopathy, organ failure, possible cancers [3,4]

**Results – focus tumour**

Patients and their families feel that the lack of response to their problems, is more of an issue than the failure itself:

- as patients they feel incapacitated and deliberately ignored
- as individuals they feel deserted and disenfranchised
- they ask who is responsible for evaluating and responding to evidence
- they perceive that manufacturers have undue influence on surgeons
- they do not feel that stakeholders co-operate fully enough or share and discuss data on implant failure
- they feel that professionals ‘close ranks’ when there are problems

Patients feel ill-served by healthcare

- they report overlong waiting times for tests connected to their metal-on-metal hip problems and/or tests not carried out
- they query whether surgeons’ technical expertise is sufficient in itself and think surgeons should be more circumspect in their selection of particular implants

**Surveys – preliminary thoughts**

Patients talk of lives disrupted, often severely, by the health problems caused by their faulty hip implant(s). Loss of work is common as is curtailment of social life, hobbies and family activities.

**Conclusions**

Themes of co-operation, communication and transparency emerge as patients question whether responsible organisations are working together sufficiently to address problems with metal-on-metal hips. Patients can not see clear lines of responsibility for solving such problems. They therefore view the system of post-market implant surveillance as unfit for purpose and ethically questionable.

---

**References**


