

# Case Study:

## OrthAlign® Technology was Imperative for this Patient with a Prior Spinal Fusion Undergoing Right THA

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### Introduction

76 year old male patient presented with severe right hip DJD and history of prior spinal fusion L2-L5 (Figure1). Due to loss of lumbar lordosis from prior spinal fusion he developed decreased pelvic tilt, which decreased accommodative femoral anteversion.

### Approach

Intraoperative fluoroscopy would have provided a false perception of acetabular anteversion due to alterations in sagittal alignment and pelvic tilt.

HipAlign® was chosen to help precisely place the acetabular component in an ideal anatomic location, minimizing impingement and dislocation risk (Figure 2).

### Conclusion

**HipAlign gave Dr. Durbhakula confidence to place the acetabular component in the proper anteversion to promote long term stability and to accommodate for pelvic tilt.**



Figure 1

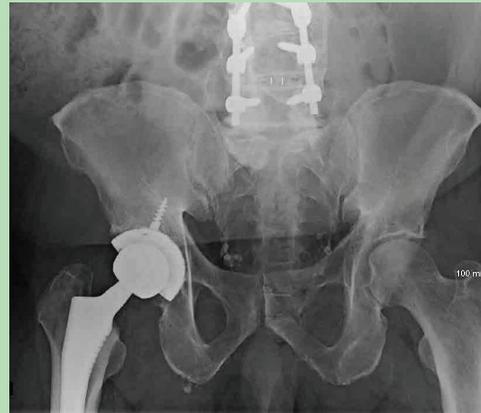


Figure 2

A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product in treatment of a particular patient. The information presented herein is intended to educate the surgeon community on OrthAlign's technologies and applications. A surgeon must always refer to the Product labeling and instructions for use before using any OrthAlign Product. The Products depicted are only to be used by a trained licensed physician. Please refer to the Product's Instructions for Use for complete important safety information. Prescription Only (Rx): Federal Law restricts this device to sale by or on the order of a physician. The author was a paid consultant of the Company at the time that this case study was prepared.