

South Central Priorities Committee

(Southampton, Hampshire, Isle of Wight and Portsmouth PCTs)

Policy Recommendation 105: Metal on metal hip resurfacing

Date of Issue: April 2011

The Southampton, Hampshire, Isle of Wight and Portsmouth Priorities Committee has considered the evidence of clinical and cost-effectiveness for metal on metal hip resurfacing and **RECOMMENDS** that NHS funding should be available to provide resurfacing as an alternative to total hip replacement in men aged younger than 55 years, who after discussion of the benefits and risks, consider that resurfacing is the preferred option for them.

In older men, and women of all ages, NHS funding for hip resurfacing should be **LOW PRIORITY**.

Evidence suggests that hip resurfacing provides outcomes in terms of pain and function which are similar to those from conventional total hip replacement in younger patients. Although higher rates of aseptic loosening and revision are reported for resurfacing compared to total replacement, there is a significantly lower risk of dislocation. There is some evidence to suggest that revision procedures may be clinically more straightforward and associated with fewer complications following initial hip resurfacing compared to primary hip joint replacement.

In men aged under 55 years, five year revision rates for resurfacing may not be significantly different from cemented total joint replacement. In older men and women of all ages, revision rates from resurfacing are significantly higher than from cemented total replacement.

The Priorities Committee notes that there have been recent safety concerns about the possible systemic absorption of metal ions from some metal on metal prostheses. The committee **RECOMMENDS** that patients with metal on metal hip prostheses (including metal on metal resurfacing devices) should be followed up in line with the recommendations in the MHRA Safety Alert (2010).

NOTES:

1. *Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.*
2. *This policy will be reviewed in the light of new evidence or guidance from NICE.*
3. *South Central policies can be viewed at <http://www.sph.nhs.uk/priorities/policy-statements>*