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## Proper patient selection, better fixation associated with successful femoral osteotomy for lateral compartment OA


Orthopaedic surgeons should focus on four key prognostic factors related to femoral osteotomies to improve outcomes.

“Femoral osteotomy remains a valid treatment for lateral osteoarthritis. Improved patient selection, planning, fixation and osteotomy techniques will lead — but we have to prove that — to better results,” **Ronald J. van Heerwaarden, MD**, said during his presentation.

According to van Heerwaarden, a radiograph can help confirm the proper patient is selected, someone with true lateral compartment osteoarthritis and deformity present just in the femur. “It is all about planning,” he said.

Measurements should be down to the millimeter so that both the planning and the osteotomy are done accurately. Van Heerwaarden encouraged his colleagues who perform lateral femoral osteotomies to read the “new” results in the literature and to learn how to use a biplane technique.

“You should try to go over to biplane techniques,” he said, showing examples of how they can lead to successful results and good alignment. Osteotomy fixation is another prognostic factor, but “you can talk for hours about fixation,” van Heerwaarden said.

Although he was trained using the AO angle blade plate, he said today he finds it challenging to perform a lateral femoral osteotomy with that implant. “There are many other solutions. If you tailor the fixation strength of your construct to postop rehab, you can use any plate.” 

van Heerwaarden RJ. Presentation #SY29-8053.

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