



AO Recon Course— Complex Total Hip Arthroplasty

Course with human anatomical specimens

August 28-29, 2025

Geneva, Switzerland

EVENT PROGRAM with Learning Objectives



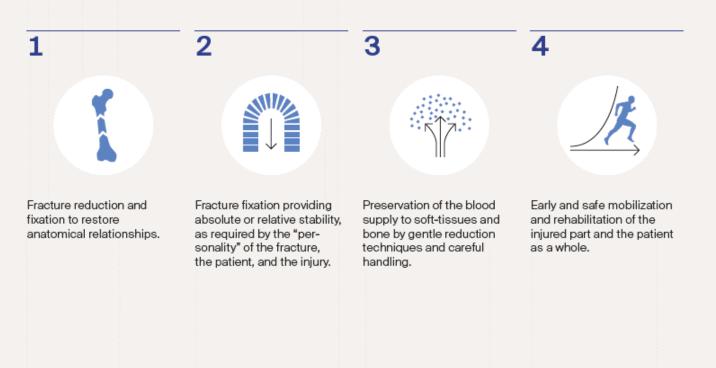
Mission

The AO's mission is promoting excellence in patient care and outcomes in trauma and musculoskeletal disorders.

Purpose statement

AO Trauma is committed to improve patient care outcomes through the highest quality education. We strive to combine the right knowledge and surgical skills that empower the orthopedic and trauma surgeons to put theory into practice and to improve fracture management for the benefit of the patient.

The AO principles of fracture management



Welcome

Dear AO Recon course participant,

It is with great pleasure that we welcome you to our complex course that offers certified, experienced orthopedic surgeons training on the key aspects of complex primary and revision hip arthroplasty.

Over the program's 1.5 days, renowned expert surgeons will lead interactive discussion groups and instructional lectures and deliver technical know-how in practical exercises to develop your decision-making competency.

Your current level of knowledge, attitudes, and skills will be challenged throughout the course. The best-in-class curriculum and faculty will provide you a memorable learning experience that will remain with you for a lifetime.

We hope that you will immediately integrate these insights into your daily practice, in order to reach our shared goal: to improve patient care through surgical excellence.

Yours sincerely,





Carsten Perka Chairperson AO Recon Steering Board

Bassam Masri Chairperson AO Recon Education Forum

Chairpersons



Panayiotis Christofilopoulos Hôpital de la Tour Meyrin, Switzerland



Sébastien Lustig Hospices Civils de Lyon Lyon, France

Regional Faculty

Francesco Benazzo, Fondazione Poliambulanza Istituto Ospedaliero, Brescia, Italy

George Macheras, Henry Dunant Hospital, Athens, Greece

Lazaros Poultsides, Aristotle University of Thessaloniki, Greece

Richard Trebse, Orthopedic Hospital Valdoltra, Slovenia

National faculty

Karl Stoffel, University of Basel, Basel, Switzerland

Moritz Tannast, Universitätsklinik für Orthopädische Chirurgie und Traumatologie, Bern, Switzerland

Michael Wettstein, Institut de Traumatologie et d'Orthopédie du Léman Suisse Lausanne, Switzerland

Goal of the event

The AO Recon Course—Complex Total Hip Arthroplasty teaches current concepts in the treatment of patients with a need for revision or complex primary arthroplasty in the hip.

Target participants

This course is targeted at certified, experienced orthopedic surgeons who wish to enhance their knowledge and skills in complex arthroplasty.

Learning objectives

At the end of this course, participants will be able to:

- Describe a systematic clinical, laboratory, and radiographic evaluation in revision and complex primary arthroplasty
- Optimize preoperative planning
- Adopt a patient-centred approach
- Optimize patients preoperatively to reduce complications
- Describe and discuss safe and effective procedures for revision and complex primary arthroplasty
- Discuss the management of early and late problems or complications
- Communicate and facilitate a multidisciplinary team-based approach
- Apply best practice to optimize and document patient outcomes



Event description

This course is modular in structure and highly interactive. Short, evidence-based lectures cover the key information required. Moderated case discussions in small groups will expand on each topic and help participants to develop decision-making skills in small group discussions and surgical management skills in the anatomical specimen laboratory. Participants will have the opportunity to share their experience with peers and international faculty. All factors related to achieving the best possible outcomes in complex and revision arthroplasty will be covered.

Day 1

Thursday, August 28, 2025

08:30-09:00	Registration	Chaimeanana
	Welcome and introduction r: S Lustig s for revision hip arthroplasty and preoperative plan	Chairpersons
IdentifyOptimized	f this module, participants will be able to: y the indications for revision hip arthroplasty ze the medical management of patients undergoing revision hip arthro m preoperative planning for revision hip arthroplasty	plasty
09:10–09:20	Overview of failure mechanisms and indications for revision hip arthroplasty Interactive session with participants, summarized afterward by faculty Learning objectives • Loosening of fixation • Wear at the articulation • Osteolysis • Tribo-corrosion • Instability • Infection • Periprosthetic fractures • Leg length discrepancy • Component fracture • Recognize the latest demographics of the most common reasons (changed over time) • Local registries – data on 2 or 3 main local problems	F Benazzo
09:20–09:30	 Preoperative investigation and planning for revision hip arthroplasty Learning objectives Medical risk factor identification Medical optimization Laboratory investigations to rule out infection Imaging Joint center restoration Acetabular bone stock deficiency management Femoral deformity correction Feenoral bone stock deficiency management Recognize and manage soft tissue deficiency Prepare a preoperative plan to include the necessary extraction instruments, implants, bone graft, and supplementary plans for unanticipated complications 	M Wettstein
09:30–09:40	 Assessment of acetabular and femoral bone loss Learning objectives Classify the bone loss (Gross, Paprosky, AAOS) Select imaging modality: plain x-rays (Judet views) and CT scan and interpret the findings Recognize pelvic discontinuity 	G Macheras

Module 2

Moderator: P Christofilopoulos

Revision arthroplasty of the hip

At the end of this module, participants will be able to:

- Describe and prepare safe and effective procedures
- Recognize, stratify, and discuss management of early and late problems or complications
- Facilitate a multidisciplinary team-based approach

Discuss best practice to optimize patient outcomes • 09:50-10:00 Extended surgical approaches L Poultsides Learning objectives Discuss the indications and techniques for the following approaches: Posterior approach Extended trochanteric osteotomy • Trochanteric slide Transfemoral osteotomy 10:00-10:10 Well-fixed implant removal M Tannast Learning objectives Describe the tools and techniques to remove the following: Cemented cups • Cementless cups • Cemented stems Cementless stems Broken stems 10:10-10:20 Questions and answers All 10:20-10:40 Break

10:40-11:30Treatment options for acetabular bone loss
Case-based lectures with discussion

Case 1: Jumbo cup (10 min)	P Christofilopoulos
Case 2: Augments (10 min)	K Stoffel
Case 3: Cages (10 min)	S Lustig
Case 4: Pelvic discontinuity (10 min)	G Macheras
Discussion (10 min)	

11:30–12:10 Treatment options for femoral bone loss Case-based lectures with discussion M Tannast Case 1: Fluted titanium, tapered stem (10 min) R Trebse Case 2: Cement within cement and impaction grafting (10 min) M Wettstein Case 3: Proximal femoral replacement (10 min) M Wettstein

Discussion (10 min)

13:10–14:10 Lunch

Module 3

Moderator: G Macheras

Complex primary total hip arthroplasty (THA)

At the end of this module, participants will be able to:

- Classify and manage hip dysplasia requiring THA
- Plan and perform a THA after femoral and acetabular fractures and femoral osteotomies
- Plan and perform a THA in ankylosed hip

14:10–15:00 Small group discussion 2

Case 1: Dysplasia (CROWE 3/4)

All faculty (paired)

Case 2: Conversion THA for posttraumatic acetabular fracture

Case 3: Conversion THA for posttraumatic femoral fracture

Module 4

Moderator: L Poultsides

Complications

At the end of this module, participants will be able to identify and manage the common complications after THA:

- Infection
- Periprosthetic fractures
- Dislocation and instability

15:00–15:55	Infection and periprosthetic fractures Case-based lectures with discussion Case 1: Infection after hip replacement (15 min) Case 2: Classification and treatment algorithm for hip (10 min)	M Wettstein K Stoffel
	Case 3: Internal fixation for hip femoral periprosthetic fracture (10 min)	R Trebse
	Case 4: Revision for hip femoral periprosthetic fracture (10 min)	F Benazzo
	Discussion (10 min)	
	 Develop a treatment plan in the following situations: Acute infection (sensitive or resistant organism, cemented or cementless hip) and chronic infection Periprosthetic fracture (well-fixed implant or loose implant) 	
15:55-16:15	Break	

16:15–17:05 Dislocation Case-based lectures with

Case-based lectures with discussion

Overview of instability after hip replacement (10 min) G Macheras

Case 1: Spinopelvic relationships in hip dislocation (10 min)

P Christofilopoulos

	Case 2: Dual mobility cups (10 min)	M Tannast
	Case 3: Constrained cups (10 min)	S Lustig
	Discussion (10 min)	L Poultsides
	Learning objectives Treatment plan in the following situations: • Acute postoperative with a well-positioned component • Dislocation secondary to malposition of the components • Dislocation secondary to adverse reaction to metal debris	
17:05–17:50	Optional topics relevant to the local participants (or their cases)	All
17:50–18:00	Wrap-up and take-home messages	Chairpersons

Day 2 Friday, August 29, 2025

08:00–08:15	Preparation for the anatomical specimen laboratory	Lab director
08:15–08:30	Introduction to the laboratory and overview of the day's activities 24 participants at 6 stations	Lab director
08:30–13:15	Anatomical specimen laboratory—hip arthroplasty	Lab director
(including 30 min break)	 Posterior approach to the hip (30 min) Reconstruction of acetabular defect with augments and revision cup (70 min) Implantation of an uncemented stem (simulated by leaving the last broach in place) (10 min) Extended trochanteric osteotomy (ETO) (20 min) Implantation of a modular revision stem (60 min) Refixation of ETO with cerclage wires (10 min) Anatomical dissection (if time allows) Note for chairpersons: Optional exercise to integrate after the posterior approach - plate osteosynthesis of the posterior column (add 20 min)	Faculty demonstrators (1 assigned for each procedure) All faculty at tables

13:15–13:30 Closing of course

Event information

Organization

AO Foundation

Giorgia Perpellini Clavadelerstrasse 8 7270 Davos Platz, Switzerland Email <u>giorgia.perpellini@aofoundation.org</u>

Participants' contact

Denia Schönbächler E-mail: aoges.emea@aofoundation.org

Registration fee

CHF 2000

Included in the course fee are course material, coffee breaks, lunches, course dinner at the Café Grütli, and the course certificate.

Cancellation policy

Cancellation policy: 50% until 30 days before the event. No refund thereafter.

Online registration

Event Detail (site.com)

Language English

European CME accreditation An application has been made to the UEMS-EACCME[®] in Brussels for CME accreditation of this event.

Venue

SWISS Foundation for Innovation and Training in Surgery Rue Gabrielle-Perret-Gentil 4 1205 Geneva Switzerland Website

Sponsor

We thank our major industry Johnson&Johnson MedTech for contributing key in-kind support (materials and logistics), without which this event would not be possible, as well as an unrestricted educational grant.

Johnson&Johnson MedTech

General information

Event organization compliance

In certain countries where AO has no office but offers educational events, the AO cooperates with third party companies to conduct local organization and logistics, as well as to communicate with participants in the local language. In these cases, the AO has put rules and guidelines in place to ensure that this cooperation has no impact on the curricula, scientific program, or faculty selection.

AO funding sources

Unrestricted educational grants from different sources are collected and pooled together centrally by the AO.

All events are planned and scheduled by local and regional AO surgeon groups based on local needs assessments. We rely on industrial/commercial partners for in-kind support to run simulations/skills training if educationally needed.

Evaluation guidelines

All AO events apply the same evaluation process, which includes pre- and post-event online evaluation and on-site written questionnaires. These evaluation tools help ensure that AO continues to meet your training needs.

Disclosures and conflicts of interest

Disclosure information and potential conflicts of interest (COI) can be viewed at the event webpage.

Intellectual property

Event materials, presentations, and case studies are the intellectual property of the event faculty. All rights are reserved. For more information, please see: www.aofoundation.org/legal. Recording, photographing, or copying of lectures, practical exercises, case discussions, or any course materials is absolutely forbidden.



The AO Foundation reserves the right to film, photograph, and audio record during their events. Participants must understand that in this context they may appear in these recorded materials. The AO Foundation assumes participants agree that these recorded materials may be used for AO marketing and other purposes and made available to the public.

Security

There will be a security check at the entrance of the building. Wearing of a name tag is compulsory during lectures, workshops, and group discussions.

No insurance

The event organization does not take out insurance to cover any individual against accidents, theft, or other risks.

Use of mobile phone

Mobile phone use is not allowed in the lecture halls and in other rooms during educational activities. Please be considerate of others by turning off your mobile phone.

Principles of AO educational events

1. Academic independence

Development of all curricula, design of scientific event programs, and selection of faculty are the sole responsibilities of volunteer AO network surgeons. All education is planned based on needs assessment data, designed and evaluated using concepts and evidence from the most current medical education research, and reflects the expertise of the AO Education Institute (www.aofoundation.org).

Industry participation is not allowed during the entire curriculum development and planning process to ensure academic independence and to keep content free from bias.

2. Compliance to accreditation and industry codes

All planning, organization, and execution of educational activities follow existing codes for accreditation of highquality education:

- Accreditation Criteria of the Accreditation Council for Continuing Medical Education, US (www.accme.org)
- ACCME Standards for Commercial Support: Standards to Ensure Independence in CME Activities (www.accme.org)
- Criteria for Accreditation of Live Educational Events of the European Accreditation Council for Continuing Medical Education (www.uems.eu)

Events that receive direct or indirect unrestricted educational grants or in-kind support from industry also follow the ethical codes of the medical industry, such as:

- Eucomed Guidelines on Interactions with Healthcare Professionals (www.medtecheurope.org)
- AdvaMed Code of Ethics on Interactions with Health Care Professionals (advamed.org)
- Mecomed Guidelines on Interactions with Healthcare
 Professionals (www.mecomed.org)

3. Branding and advertising

No industry logos or advertising (apart from the AO Foundation and its clinical divisions) are permitted in the area where educational activities take place.

Sponsors providing financial or in-kind support are allowed to have a promotional booth or run activities outside the educational area with approval from the event chairperson.

4. Use of technologies and products in simulations

In case simulations are chosen as an educational method to educate skills, we only use technology approved by the AO Technical Commission—a large independent group of volunteer surgeons developing and peer reviewing new technology.

More information about the AO Technical Commission and its development and approval processes can be found on the AO's website: www.aofoundation.org.

5. Personnel

Industry staff members are not permitted to interfere with the educational content or engage in educational activities during the event.