

## MBA Total Conventional Hip Investigation

Note: This analysis compares the MBA acetabular prosthesis with all other total conventional hip prostheses.

This prosthesis has been identified as having a significantly higher rate of revision. For a detailed explanation of the process used by the Registry that results in identification of prostheses that have a higher than anticipated rate of revision please refer to the Prostheses with Higher than Anticipated Rates of Revision chapter of the most recent AOANJRR Annual Report, <https://aoanjrr.sahmri.com/annual-reports-2025>.

Note: Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator. Procedures using prostheses with no recorded use in 2024 are excluded from the comparator.

**TABLE 1**

### Revision Rate of Primary Total Conventional Hip Replacement

The revision rate of the MBA total conventional hip prosthesis is compared to all other total conventional hip prostheses.

**Table 1: Revision Rates of Primary Total Conventional Hip Replacement**

Component	N Revised	N Total	Obs. Years	Revisions/100 Obs. Yrs (95% CI)
MBA	18	124	1148	1.57 (0.93, 2.48)
Other Total Conventional Hip	19492	552154	3552443	0.55 (0.54, 0.56)
<b>TOTAL</b>	<b>19510</b>	<b>552278</b>	<b>3553590</b>	<b>0.55 (0.54, 0.56)</b>

Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**TABLE 2****Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement**

The yearly cumulative percent revision of the MBA total conventional hip prosthesis is compared to all other total conventional hip prostheses.

**Table 2: Yearly Cumulative Percent Revision (95% CI) of Primary Total Conventional Hip Replacement**

CPR	1 Yr	2 Yrs	3 Yrs	4 Yrs	5 Yrs	6 Yrs	7 Yrs	8 Yrs
MBA	4.0 (1.7, 9.4)	6.5 (3.3, 12.6)	8.2 (4.5, 14.8)	9.2 (5.2, 15.9)	10.2 (5.9, 17.2)	10.2 (5.9, 17.2)	11.4 (6.7, 18.9)	12.8 (7.7, 20.8)
Other Total Conventional Hip	1.7 (1.7, 1.8)	2.2 (2.1, 2.2)	2.5 (2.4, 2.5)	2.8 (2.7, 2.8)	3.0 (3.0, 3.1)	3.3 (3.3, 3.4)	3.6 (3.5, 3.6)	3.9 (3.8, 3.9)
CPR	9 Yrs	10 Yrs	11 Yrs	12 Yrs	13 Yrs	14 Yrs	15 Yrs	16 Yrs
MBA	12.8 (7.7, 20.8)	16.0 (9.9, 25.5)	17.8 (11.1, 27.8)					
Other Total Conventional Hip	4.2 (4.1, 4.2)	4.4 (4.4, 4.5)	4.8 (4.7, 4.8)	5.2 (5.1, 5.3)	5.5 (5.4, 5.6)	5.9 (5.8, 6.0)	6.3 (6.2, 6.4)	6.7 (6.6, 6.9)
CPR	17 Yrs	18 Yrs	19 Yrs	20 Yrs	21 Yrs	22 Yrs	23 Yrs	
MBA								
Other Total Conventional Hip	7.1 (6.9, 7.2)	7.4 (7.3, 7.6)	7.9 (7.7, 8.1)	8.3 (8.0, 8.5)	8.8 (8.5, 9.1)	9.3 (9.0, 9.7)	9.9 (9.4, 10.5)	

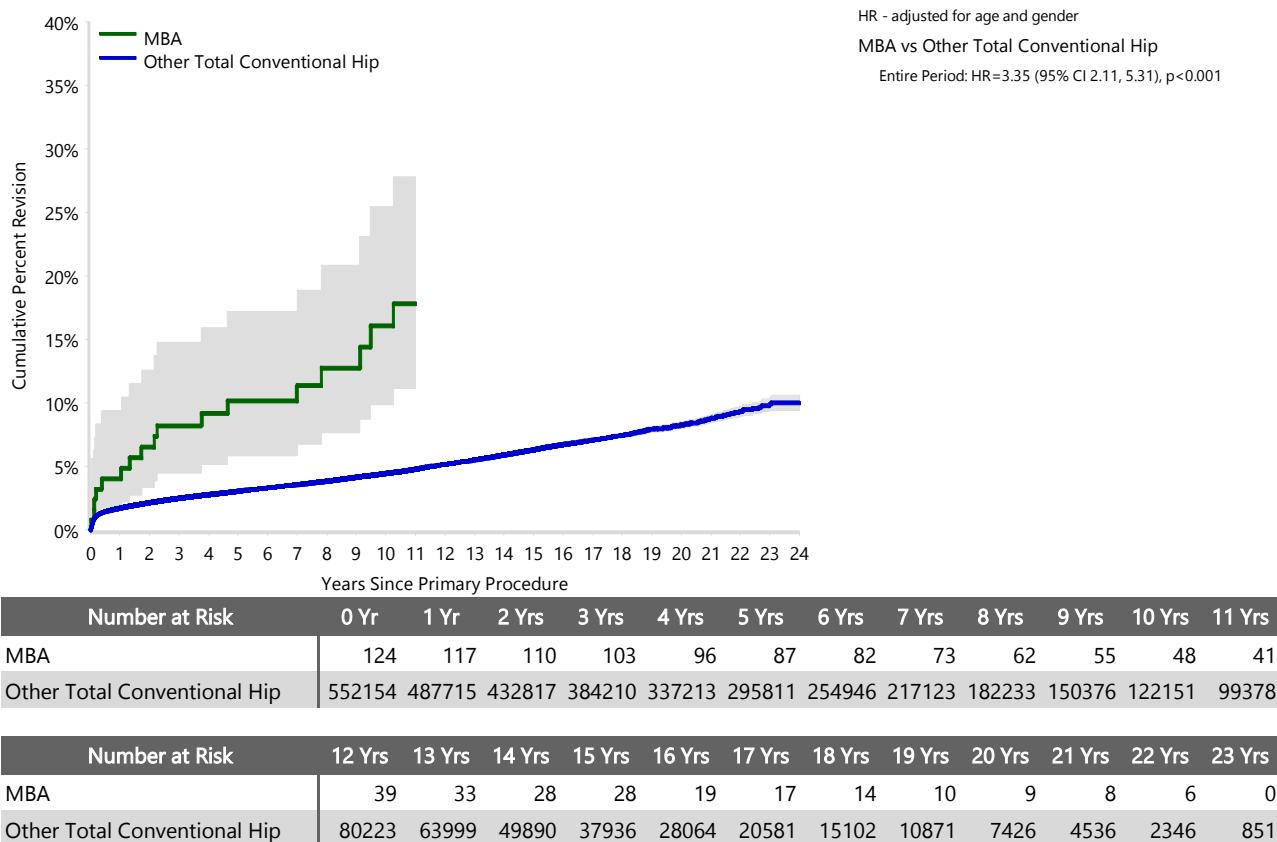
Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**FIGURE 1****Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement**

The yearly cumulative percent revision of the MBA total conventional hip prosthesis is compared to all other total conventional hip prostheses. In addition, hazard ratios are reported.

Hazard ratios are reported for specific time periods during which the hazard ratio is constant. This is done to enable more specific and valid comparisons of the risk of revision over time. The pattern of variation in risk has important implications with respect to the underlying reasons for any difference.

**Figure 1: Cumulative Percent Revision of Primary Total Conventional Hip Replacement**



Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**TABLE 3****Primary Diagnosis for Revised Primary Total Conventional Hip Replacement**

This table identifies the diagnosis of the primary procedure which was subsequently revised. This information is provided as there is a variation on outcome depending on the primary diagnosis. It is therefore important when considering the reasons for a higher than anticipated rate of revision that there is identification of the primary diagnosis. This information should be compared to the primary diagnosis for the revisions of all other total conventional hip prostheses.

**Table 3: Primary Diagnosis for Revised Primary Total Conventional Hip Replacement**

Primary Diagnosis	MBA		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Osteoarthritis	16	88.9	16174	83.0
Fractured Neck Of Femur	1	5.6	1436	7.4
Osteonecrosis	1	5.6	856	4.4
Developmental Dysplasia			313	1.6
Rheumatoid Arthritis			210	1.1
Failed Internal Fixation			157	0.8
Tumour			148	0.8
Other Inflammatory Arthritis			112	0.6
Fracture/Dislocation			53	0.3
Other			19	0.1
Arthrodesis Takedown			14	0.1
<b>TOTAL</b>	<b>18</b>	<b>100.0</b>	<b>19492</b>	<b>100.0</b>

Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**TABLE 4****Reasons for Revision**

This is reported in two ways: a percentage of primary procedures revised and as a percentage of all revision procedures.

**% Primaries Revised:** This shows the proportional contribution of each revision diagnosis as a percentage of the total number of primary procedures. This percentage can be used to approximate the risk of being revised for that diagnosis. Differing percentages between groups, with the same distribution of follow up time, may identify problems of concern.

**% Revisions:** The number of revisions for each diagnosis is expressed as a percentage of the total number of revisions. This shows the distribution of reasons for revision within a group but cannot be used as a comparison between groups.

**Table 4: Primary Total Conventional Hip Replacement - Reason for Revision (Follow-up Limited to 22.9 Years)**

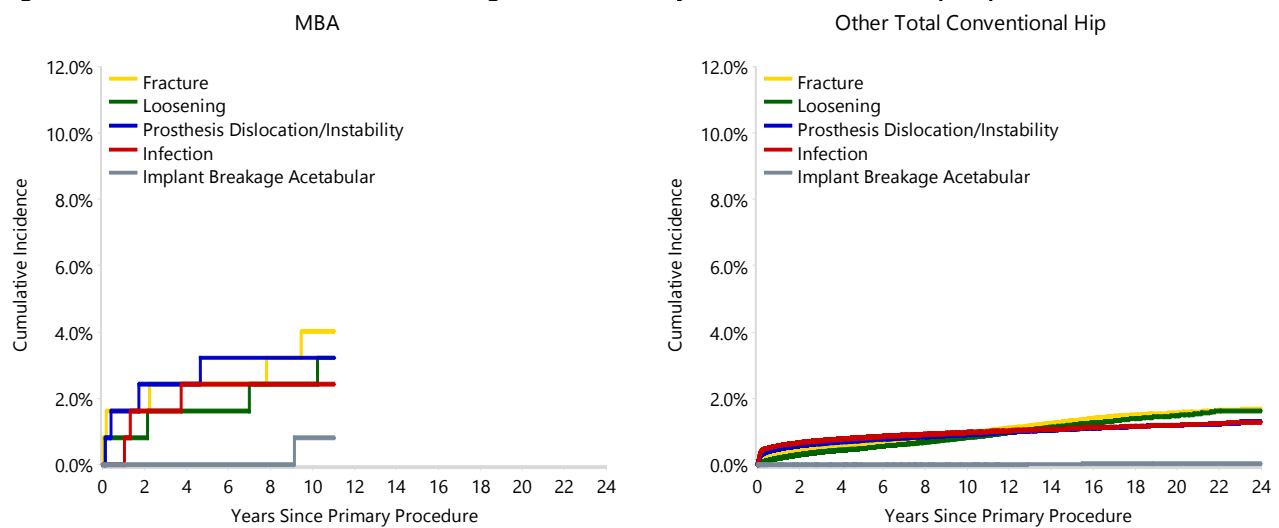
Revision Diagnosis	Number	MBA		Other Total Conventional Hip		
		% Primaries Revised	% Revisions	Number	% Primaries Revised	% Revisions
Infection	3	2.4	16.7	4771	0.9	24.5
Prosthesis Dislocation/Instability	4	3.2	22.2	4402	0.8	22.6
Fracture	5	4.0	27.8	4346	0.8	22.3
Loosening	5	4.0	27.8	3707	0.7	19.0
Pain				327	0.1	1.7
Leg Length Discrepancy				297	0.1	1.5
Malposition				269	0.0	1.4
Lysis				209	0.0	1.1
Implant Breakage Stem				201	0.0	1.0
Implant Breakage Acetabular Insert				127	0.0	0.7
Wear Acetabular Insert				109	0.0	0.6
Incorrect Sizing				98	0.0	0.5
Metal Related Pathology				92	0.0	0.5
Implant Breakage Acetabular	1	0.8	5.6	68	0.0	0.3
Wear Head				43	0.0	0.2
Tumour				40	0.0	0.2
Implant Breakage Head				31	0.0	0.2
Heterotopic Bone				27	0.0	0.1
Wear Acetabulum				10	0.0	0.1
Osteonecrosis				3	0.0	0.0
Synovitis				1	0.0	0.0
Other				312	0.1	1.6
<b>N Revision</b>	<b>18</b>	<b>14.5</b>	<b>100.0</b>	<b>19490</b>	<b>3.5</b>	<b>100.0</b>
<b>N Primary</b>	<b>124</b>			<b>552154</b>		

Note: This table is restricted to revisions within 22.9 years for all groups to allow a time-matched comparison of revisions.

Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**FIGURE 2****Cumulative Incidence Revision Diagnosis of Primary Total Conventional Hip Replacement**

This figure details the cumulative incidence of the most common reasons for revision. The five most common reasons for revision are included as long as each of these reasons account for more than 10 procedures or at least 5% of all revisions for the MBA total conventional hip prosthesis. A comparative graph is provided of the cumulative incidence for the same reasons for revisions for all other total conventional hip prostheses.

**Figure 2: Cumulative Incidence Revision Diagnosis for Primary Total Conventional Hip Replacement**

**TABLE 5****Type of Revision Performed for Primary Total Conventional Hip Replacement**

This analysis identifies the components used in the revision of the MBA total conventional hip prosthesis and compares it to the components used in the revision of all other total conventional hip prostheses.

The reason this analysis is undertaken is to identify whether there is one or more components which are being replaced that differ from the components replaced for revisions of all other total conventional hip prostheses i.e. is there a difference in the type of revision undertaken for the MBA total conventional hip prosthesis compared to all other total conventional hip prostheses.

**Table 5: Primary Total Conventional Hip Replacement - Type of Revision (Follow-up Limited to 22.9 Years)**

Type of Revision	MBA		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Femoral Component	5	27.8	6561	33.7
Acetabular Component	2	11.1	3419	17.5
THR (Femoral/Aacetabular)	4	22.2	2257	11.6
Cement Spacer			593	3.0
Removal of Prostheses			98	0.5
Reinsertion of Components			29	0.1
Total Femoral			13	0.1
Bipolar Head and Femoral			9	0.0
<b>N Major</b>	<b>11</b>	<b>61.1</b>	<b>12979</b>	<b>66.6</b>
Head/Insert			5100	26.2
Head Only	1	5.6	924	4.7
Minor Components	1	5.6	305	1.6
Insert Only	1	5.6	179	0.9
Head/Neck/Insert	3	16.7		
Bipolar Only			1	0.0
Cement Only			1	0.0
Head/Neck	1	5.6	1	0.0
<b>N Minor</b>	<b>7</b>	<b>38.9</b>	<b>6511</b>	<b>33.4</b>
<b>TOTAL</b>	<b>18</b>	<b>100.0</b>	<b>19490</b>	<b>100.0</b>

Note: This table is restricted to revisions within 22.9 years for all groups to allow a time-matched comparison of revisions.

Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**TABLE 6****Revision Rates of MBA Primary Total Conventional Hip Replacement by Fixation**

This analysis is provided as some prostheses have more than one fixation option. Additionally there are prostheses where an alternative to the recommended approach to fixation was used e.g. a cementless prosthesis that has been cemented or vice-versa.

**Table 6: Revised Number of MBA Primary Total Conventional Hip Replacement by Fixation**

Fixation	N Revised	N Total
Cementless	12	65
Hybrid (Femur Cemented)	6	59
<b>TOTAL</b>	<b>18</b>	<b>124</b>

**TABLE 7****Revision Rates of MBA Primary Total Conventional Hip Replacement by Bearing Surface**

This analysis is provided as some prostheses are combined with a variety of bearing surfaces. All bearing surfaces used with this prosthesis are listed.

**Table 7: Revised Number of MBA Primary Total Conventional Hip Replacement by Bearing Surface**

Bearing Surface	N Revised	N Total
Ceramic/Non XLPE	1	4
Metal/Non XLPE	17	120
<b>TOTAL</b>	<b>18</b>	<b>124</b>

**TABLE 8****Revision Rates of Primary Total Conventional Hip Replacement by State**

This enables a state by state variation to be identified for the MBA total conventional hip prosthesis and provides the comparative data for each of the states for all other total conventional hip prostheses.

The purpose of this analysis is to determine if the higher than anticipated rate of revision has widespread distribution between states. If there is widespread distribution then the reason for the higher than anticipated rate of revision is unlikely to be surgeon specific. If the prosthesis has been used in only a small number of states it is not possible to distinguish if the higher than anticipated rate of revision is related to the prosthesis, surgeon, technique or patient.

**Table 8: Revised Number of Primary Total Conventional Hip Replacement by State**

Component	State	N Revised	N Total
MBA	NSW	18	122
	VIC	0	2
Other Total Conventional Hip	NSW	5288	159916
	VIC	4851	143812
QLD		3893	100102
	WA	2492	62236
SA		1926	51998
	TAS	448	18480
ACT/NT		594	15610
		<b>19510</b>	<b>552278</b>
<b>TOTAL</b>			

Note: Prostheses no longer used in 2024 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

**TABLE 9****Number of Revisions of MBA Primary Total Conventional Hip Replacement by Year of Implant**

This analysis details the number of prostheses reported each year to the Registry for the MBA total conventional hip prosthesis. It also provides the subsequent number of revisions of the primaries reported in that year.

Primary procedures performed in later years have had less follow up time therefore the number revised is expected to be less than the number revised in earlier years. For example, a primary procedure performed in 2024 has a maximum of one year to be revised, whereas a primary procedure performed in 2022 has a maximum of three years to be revised.

**Table 9: Number of Revisions of MBA Primary Total Conventional Hip Replacement by Year of Implant**

Year of Implant	Number Revised	Total Number
2001	2	8
2002	7	41
2003	6	29
2004	1	19
2005	2	11
2006	0	9
2007	0	5
2008	0	2
<b>TOTAL</b>	<b>18</b>	<b>124</b>

**TABLE 10****Revision Rates of MBA Primary Total Conventional Hip Replacement by Catalogue Number Range**

Many prostheses have a number of catalogue ranges. The catalogue range is specific to particular design features; more than one catalogue range usually indicates a minor difference in design in a particular MBA prosthesis.

This analysis has been undertaken to determine if the revision rate varies according to the catalogue number range.

Model	Catalogue Range	Catalogue Description	Cement	Material	Coating
<b>Acetabular</b>					
MBA	HL4200040-HL4200064	TITANIUM GRIT BLAST W/HA ACETABULAR CUP	NO	METAL	HA COATED

**Table 10: Revised Number of MBA Primary Total Conventional Hip Replacement by Catalogue Number Range**

Acetabular Range	N Revised	N Total
HL4200040-HL4200064	18	124
<b>TOTAL</b>	<b>18</b>	<b>124</b>

**TABLE 11****Revision Rates of MBA Primary Total Conventional Hip Replacement by Component**

A prosthesis may be combined with multiple components. This analysis has been undertaken to determine if the revision rate varies according to the component with which it is combined.

**Table 11: Revised Number of MBA Primary Total Conventional Hip Replacement by Femoral Stem Component**

Femoral Stem Component	N Revised	N Total
LYDERIC II	9	77
MBA	0	1
MBA (exch neck)	8	39
Margron	1	6
Primaloc	0	1
<b>TOTAL</b>	<b>18</b>	<b>124</b>