

ML Taper Kinectiv Total Conventional Hip Investigation

Note: This analysis compares the ML Taper Kinectiv femoral stem 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 ML Taper Kinectiv 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)
ML Taper Kinectiv	220	3532	36715	0.60 (0.52, 0.68)
Other Total Conventional Hip	19492	552154	3552443	0.55 (0.54, 0.56)
TOTAL	19712	555686	3589158	0.55 (0.54, 0.56)

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 ML Taper Kinectiv 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
ML Taper Kinectiv	2.4 (2.0, 3.0)	3.2 (2.7, 3.9)	3.5 (3.0, 4.2)	4.0 (3.4, 4.7)	4.3 (3.7, 5.0)	4.5 (3.9, 5.3)	5.0 (4.3, 5.8)	5.4 (4.7, 6.2)
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
ML Taper Kinectiv	5.6 (4.9, 6.4)	6.0 (5.3, 6.9)	6.2 (5.4, 7.1)	6.4 (5.6, 7.3)	6.9 (6.0, 7.8)	7.0 (6.1, 8.0)	8.4 (7.0, 10.1)	
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
ML Taper Kinectiv							
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.

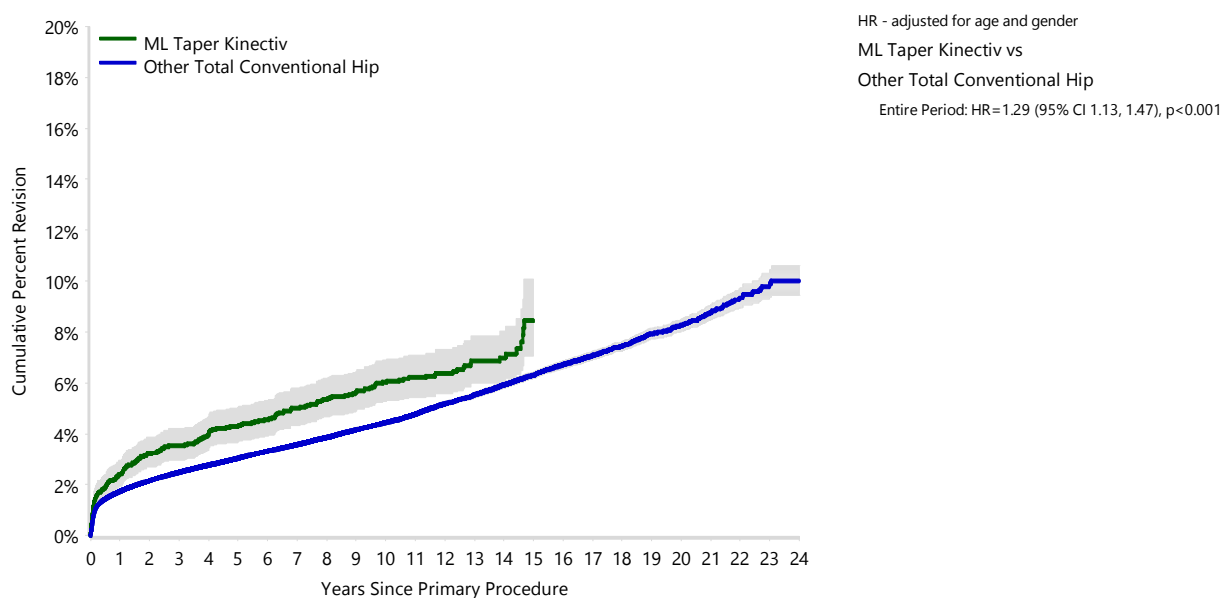
FIGURE 1

Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement

The yearly cumulative percent revision of the ML Taper Kinectiv 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



Number at Risk	0 Yr	1 Yr	2 Yrs	3 Yrs	4 Yrs	5 Yrs	6 Yrs	7 Yrs	8 Yrs	9 Yrs	10 Yrs	11 Yrs
ML Taper Kinectiv	3532	3415	3352	3301	3239	3174	3089	2928	2700	2435	2142	1824
Other Total Conventional Hip	552154	487715	432817	384210	337213	295811	254946	217123	182233	150376	122151	99378

Number at Risk	12 Yrs	13 Yrs	14 Yrs	15 Yrs	16 Yrs	17 Yrs	18 Yrs	19 Yrs	20 Yrs	21 Yrs	22 Yrs	23 Yrs
ML Taper Kinectiv	1461	1033	634	214	18	0	0	0	0	0	0	0
Other Total Conventional Hip	80223	63999	49890	37936	28064	20581	15102	10871	7426	4536	2346	851

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	ML Taper Kinectiv		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Osteoarthritis	196	89.1	16174	83.0
Fractured Neck Of Femur	7	3.2	1436	7.4
Osteonecrosis	6	2.7	856	4.4
Developmental Dysplasia	7	3.2	313	1.6
Rheumatoid Arthritis	1	0.5	210	1.1
Failed Internal Fixation			157	0.8
Tumour	1	0.5	148	0.8
Other Inflammatory Arthritis	1	0.5	112	0.6
Fracture/Dislocation	1	0.5	53	0.3
Other			19	0.1
Arthrodesis Takedown			14	0.1
TOTAL	220	100.0	19492	100.0

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 16.6 Years)

Revision Diagnosis	ML Taper Kinectiv			Other Total Conventional Hip		
	Number	% Primaries Revised	% Revisions	Number	% Primaries Revised	% Revisions
Infection	25	0.7	11.4	4743	0.9	24.7
Prosthesis Dislocation/Instability	69	2.0	31.4	4369	0.8	22.7
Fracture	57	1.6	25.9	4291	0.8	22.3
Loosening	21	0.6	9.5	3625	0.7	18.9
Pain	6	0.2	2.7	325	0.1	1.7
Leg Length Discrepancy	5	0.1	2.3	297	0.1	1.5
Malposition	6	0.2	2.7	266	0.0	1.4
Implant Breakage Stem	2	0.1	0.9	194	0.0	1.0
Lysis	4	0.1	1.8	187	0.0	1.0
Implant Breakage Acetabular Insert	2	0.1	0.9	126	0.0	0.7
Incorrect Sizing	1	0.0	0.5	98	0.0	0.5
Wear Acetabular Insert				92	0.0	0.5
Metal Related Pathology	19	0.5	8.6	81	0.0	0.4
Implant Breakage Acetabular	1	0.0	0.5	67	0.0	0.3
Wear Head				41	0.0	0.2
Tumour	1	0.0	0.5	40	0.0	0.2
Implant Breakage Head				28	0.0	0.1
Heterotopic Bone				27	0.0	0.1
Wear Acetabulum				9	0.0	0.0
Osteonecrosis				3	0.0	0.0
Synovitis				1	0.0	0.0
Other	1	0.0	0.5	310	0.1	1.6
N Revision	220	6.2	100.0	19220	3.5	100.0
N Primary	3532			552154		

Note: This table is restricted to revisions within 16.6 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 ML Taper Kinectiv 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.

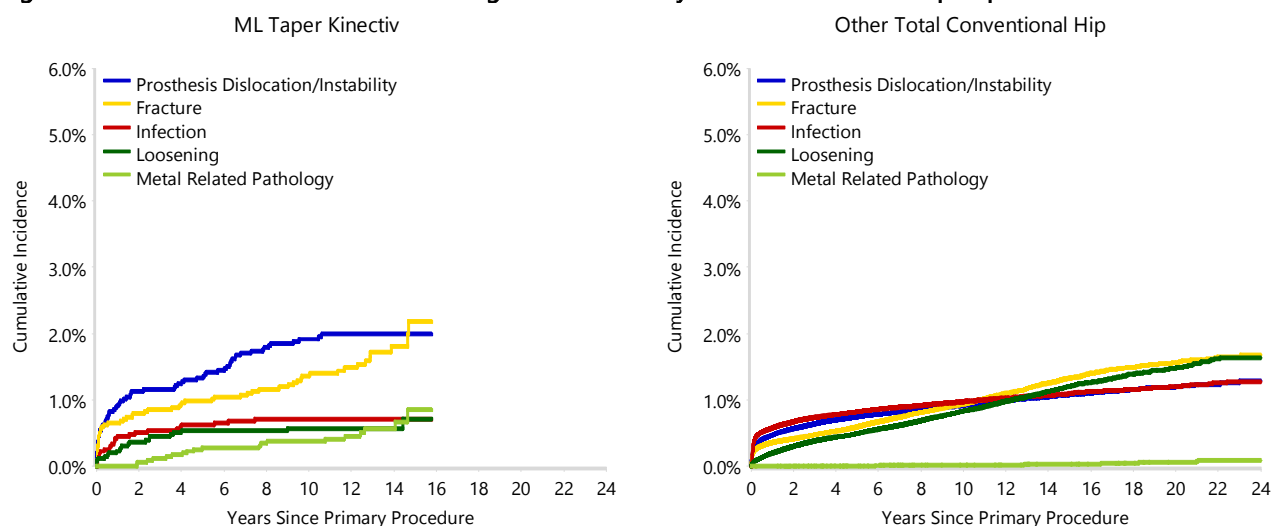
Figure 2: Cumulative Incidence Revision Diagnosis for Primary Total Conventional Hip Replacement

TABLE 5

Type of Revision Performed for Primary Total Conventional Hip Replacement

This analysis identifies the components used in the revision of the ML Taper Kinectiv 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 ML Taper Kinectiv 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 16.6 Years)

Type of Revision	ML Taper Kinectiv		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Femoral Component	77	35.0	6489	33.8
Acetabular Component	36	16.4	3340	17.4
THR (Femoral/Acetabular)	13	5.9	2196	11.4
Cement Spacer	10	4.5	592	3.1
Removal of Prostheses			97	0.5
Reinsertion of Components			29	0.2
Total Femoral			13	0.1
Bipolar Head and Femoral			9	0.0
N Major	136	61.8	12765	66.4
Head/Insert	12	5.5	5052	26.3
Head Only	5	2.3	920	4.8
Minor Components	3	1.4	302	1.6
Insert Only	2	0.9	178	0.9
Head/Neck/Insert	42	19.1		
Head/Neck	16	7.3	1	0.0
Neck Only	4	1.8		
Bipolar Only			1	0.0
Cement Only			1	0.0
N Minor	84	38.2	6455	33.6
TOTAL	220	100.0	19220	100.0

Note: This table is restricted to revisions within 16.6 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 ML Taper Kinectiv 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 ML Taper Kinectiv Primary Total Conventional Hip Replacement by Fixation

Fixation	N Revised	N Total
Cementless	216	3510
Hybrid (Femur Cemented)	0	2
Reverse Hybrid (Femur Cementless)	4	20
TOTAL	220	3532

TABLE 7**Revision Rates of ML Taper Kinectiv 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 ML Taper Kinectiv Primary Total Conventional Hip Replacement by Bearing Surface

Bearing Surface	N Revised	N Total
Ceramic/Ceramic	20	429
Ceramic/Non XLPE	1	1
Ceramic/XLPE	51	1104
Ceramic/XLPE + Antioxidant	3	36
Metal/Metal	42	295
Metal/Non XLPE	0	6
Metal/XLPE	100	1618
Metal/XLPE + Antioxidant	3	43
TOTAL	220	3532

TABLE 8**Revision Rates of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Approach**

This analysis is provided as some prostheses are used with a variety of surgical approaches. All surgical approaches used with this prosthesis are listed.

Table 8: Revised Number of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Approach

Approach	N Revised	N Total
Anterior	0	37
Lateral	7	109
Posterior	24	471
TOTAL	31	617

Note: Excludes 2915 procedures with no approach recorded

TABLE 9

Revision Rates of Primary Total Conventional Hip Replacement by State

This enables a state by state variation to be identified for the ML Taper Kinectiv 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 9: Revised Number of Primary Total Conventional Hip Replacement by State

Component	State	N Revised	N Total
ML Taper Kinectiv	NSW	104	1308
	VIC	56	828
	QLD	36	1136
	WA	20	230
	SA	2	17
	TAS	0	6
	ACT/NT	2	7
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
TOTAL		19712	555686

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 10**Number of Revisions of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Year of Implant**

This analysis details the number of prostheses reported each year to the Registry for the ML Taper Kinectiv 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 10: Number of Revisions of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Year of Implant

Year of Implant	Number Revised	Total Number
2008	8	36
2009	27	341
2010	52	647
2011	47	576
2012	18	515
2013	18	384
2014	19	345
2015	8	256
2016	8	199
2017	11	159
2018	4	74
TOTAL	220	3532

TABLE 11

Revision Rates of ML Taper Kinectiv 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 ML Taper Kinectiv 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	Stem Type	Coating
Femoral Stem						
M/L Taper Kinectiv	00771300500-00771302200	PRESS FIT MODULAR FEMORAL STEM W/KINECTIV TECHNOLOGY	NO	METAL	REQUIRES FEMNECK	
M/L Taper Kinectiv	65771300500-65771302200	HA/TCP PRESS-FIT MODULAR FEMORAL STEM W/KINECTIV TECHNOLOGY	NO	METAL	REQUIRES FEMNECK	HA COATED

Table 11: Revised Number of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Catalogue Number Range

Femoral Stem Range	N Revised	N Total
00771300500-00771302200	4	30
65771300500-65771302200	216	3502
TOTAL	220	3532

TABLE 12**Revision Rates of ML Taper Kinectiv 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 12: Revised Number of ML Taper Kinectiv Primary Total Conventional Hip Replacement by Acetabular Component

Acetabular Component	N Revised	N Total
Adept	0	1
Allofit	12	243
Avantage	3	10
Continuum	113	2246
DeltaMotion	0	11
Durom	6	17
Exceed	4	110
Exeter Contemporary	0	1
FMP	0	1
Fitmore	47	447
G7	0	5
Low Profile Cup	1	3
Mallory-Head	2	116
Mpact	0	1
PINNACLE	0	4
Regenerex	1	1
Trabecular Metal (Shell)	18	148
Trilogy	12	162
ZCA	1	5
TOTAL	220	3532