



The Centers of Disease Control and Prevention in 1994 reported that by the year 2020, arthritis will have the largest increase in numbers of new patients than any other disease in the United States (1). Before the era of joint replacement, these patients would have had difficulty avoiding crippling pain and complete dependence. Hip replacement patients attain significant improvement in quality of life, equal to or exceeding the population norm, which translates into retained independence and self-care for recipients and decreased healthcare costs for society (2, 3).

Approximately 170,000 total hip arthroplasty (THA) procedures are performed annually in the United States, and because of aging of the population and an increase in indications for THA, the demand is expected to double by the year 2030 (4). As the number of THA procedures grows, the number of total hip arthroplasty revision (THAR) procedures will also grow. A study from the Province of Ontario reported a 5:1 ratio (5302:1100) of primary to revision hip arthroplasty procedures (5). The number of revision procedures increased at an average annual rate of 4.7% between the fiscal year 1988/89 (875) and 1993/94 (1100) (5).

A full 72% of total hip recipients in the Medicare population are discharged to home (6), with most other patients eventually discharged home after transfer to a skilled nursing facility (7). Joint replacement surgeries not only restore recipients to functional lives and keep these individuals out of long-term care facilities, but they also increase the length of survival when compared to the general population (8).

The wide spectrum of topics covered in this section of the *Journal of the Southern Orthopaedic Association* comprise crucial concepts in primary total hip arthroplasty that are essential to the practicing hip replacement surgeon. We hope you will find this issue interesting and useful in your endeavor to update your knowledge on primary hip arthroplasty surgery. Finally, we would like to acknowledge the help of Kimberly Collignon, as

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