

**To:** Global Distribution  
**From:** Hip Marketing Team **Date:** July 8, 2015  
**Subject:** In-hospital cost comparison between the standard lateral and supercapsular percutaneously-assisted total hip surgical techniques for total hip replacement

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The Clinical and Hip Marketing Teams are pleased to announce the publication of another open access Journal Article by Dr. Wade Gofton related to potential cost savings when using the SuperPath® Hip Replacement technique.

#### **Key General Talking Points**

- The SuperPath® Hip Replacement technique is associated with shorter Length of Stay than most traditional hip procedures
- Shorter Length of Stay can lead to a lower total treatment cost and allow patients to return to daily activities sooner
- Favorable results tied to the SuperPath® Hip Replacement technique are seen even during the surgeon's learning curve

#### **Key Article Talking Points**

- The in-hospital costs per patient (excluding implant costs) for the lateral approach were 28.4% higher than for the SuperPath® Hip Replacement technique
- The main drivers of the cost difference were Transfusions, Narcotics, Patient Rooms, Patient Food, Physical Therapy, Occupational Therapy and Social Work
- Data was collected for the first 49 patients treated by Dr. Gofton using the SuperPath® Hip Replacement technique (in other words it was during his learning curve)
- The data was compared to 50 patients treated by another surgeon in the same institution during the same time period with significant experience with the lateral approach
- Patients treated with the lateral approach had an average Length of Stay of 5.1 days compared to the average 2.1 days Length of Stay recorded with the SuperPath® Hip Replacement technique
- Although it is not required for the technique, Dr. Gofton requested radiographs on all patients as a precaution during his learning curve which contributed to the higher Imaging costs
- A chart summarizing the cost differences is noted below

This article reinforces our message that the SuperPath® Hip Replacement technique is a muscle and tissue sparing approach that supports a patient's faster return to daily activities at a lower entire episode of treatment cost than most traditional hip procedures being performed today.

Published in International Orthopedics, the article can be accessed online at the link:

<http://link.springer.com/article/10.1007/s00264-015-2878-4>

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In addition, while this article focuses on in-hospital costs, the article “Thirty-day readmission rate and discharge status following total hip arthroplasty using the supercapsular percutaneously-assisted total hip surgical technique” by Drs. Gofton , Chow and Olsen can be used to support lower **post discharge** costs associated with the SuperPath® Hip Replacement technique. This open access article was published in International Orthopedics last year and is currently available on eMedia. Together, the two articles suggest that the SuperPath® Hip Replacement technique supports a lower total episode of care cost.

Please contact your Clinical and Hip Marketing Teams with any questions about the information in this article and how you may use it to communicate the benefits of the SuperPath® Hip Replacement technique.

### Summary of In-Hospital Cost Comparison between SuperPath® and the Lateral Approach

Cost Category	Group with Lower Cost	Cost Difference	Suggested Reason for Difference
Overall	SuperPath®	Lateral 28.4% higher	
Admissions	Lateral	SuperPath® 1.9% higher	Similar
Operating Room	Lateral	SuperPath® 0.1% higher	Similar
Post-Anesthesia Care Unit	Lateral	SuperPath® 13.5% higher	
Transfusions	SuperPath®	Lateral 92.5% higher	SuperPath® is a tissue sparing technique
Imaging	Lateral	SuperPath® 105.9% higher	Optional radiographs collected during SuperPath® learning curve
Narcotics	SuperPath®	Lateral 42.5% higher	SuperPath® is a tissue sparing technique and decreased length of stay
Laboratory Testing	SuperPath®	Lateral 17.0% higher	
Patient Room	SuperPath®	Lateral 60.4% higher	Decreased length of stay
Patient Food	SuperPath®	Lateral 62.8% higher	Decreased length of stay
Physical Therapy	SuperPath®	Lateral 52.5% higher	Decreased length of stay
Occupational Therapy	SuperPath®	Lateral 88.6% higher	Improved early ambulation and function
Social Work	SuperPath®	Lateral 92.9% higher	Some Lateral patients sent to short term rehabilitation facilities