

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH PORTFOLIO

Budget Estimates 2015-16, 1 - 2 June 2015

Ref No: SQ15-000648

OUTCOME: 7 - Health Infrastructure, Regulation, Safety and Quality

Topic: Metal on Metal Hip Implants

Type of Question: Hansard Page 62, 2 June 2015

Senator: Xenophon, Nick

Question:

1. The 2014 metal on metal total conventional hip arthroscopy report by the AOANJRR outlines a decline in use and higher revision rates for metal on metal devices.
 - a) Why is the TGA not placing further restrictions on the use of these devices or withdrawing them completely from the market?
 - b) Overall, is there a higher rate of revision and complication?

Answer:

1. a)

The Therapeutic Goods Administration (TGA) seeks independent expert advice in relation to regulatory actions involving orthopaedic implants. The TGA sought advice from the Australian Orthopaedic Association (AOA) and the Orthopaedic Subcommittee (OSC) - formerly known as the Orthopaedic Expert Working Group. They advised that Metal on Metal (MoM) hip implants may be suitable for some patients who require hip replacement and that they should remain available to surgeons for particular patients.

In providing their advice the AOA and the OSC also made the following comments:

- Many MoM hip replacements had been performing as well as similar implants available in Australia. A blanket ban on all MoM hip implants would prevent some good implants from being used.
- Suboptimal performance was believed to be mainly associated with the use of larger femoral heads in conventional total hip replacement, and small femoral heads in the resurfacing hip replacement procedure. This emerging knowledge had changed surgical practice with surgeons better able to tailor the choice of implant to the needs of individual patients.
- An implant-by-implant review of performance data generated by the AOANJRR continued to be the most appropriate way to evaluate the relative performance of orthopaedic implants, including those that may have a MoM articulating surface.

The OSC has reviewed its advice on two occasions between 2012 and 2015, and has re-affirmed it on both occasions.

- b) Overall the rate of MoM implants is higher than that of other implants, but this is mainly due to the fact that the ASR was a commonly used MoM implant and it has a very high revision rate, therefore, biasing the overall statistics for MoM implant.