Letters and comments

A modified technique for femoral head graft acquisition using an acetabular reamer

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COMMENT ON

Verma R, Ashworth MA

Innovative way of taking bone graft from the femoral head. *Ann R Coll Surg Engl* 2006; **88**: 416
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With reference to the femoral head graft acquisition technique described by Verma and Ashworth, we would like to draw attention to a modification of this technique. The surgeon decides in advance whether femoral head autograft may be required. Having dislocated the hip, the femoral head is left attached. A saw is used to create a flat surface on the femoral head, exposing cancellous bone (Fig 1). An acetabular reamer is applied and cancellous bone is reamed using pressure. A small reamer diameter (eg 44mm or 46mm) is preferable (Fig 2). Two or three good fills can usually be taken. The femoral neck is then resected in the usual manner (Fig 3). This technique maintains stability without needing additional support from a Hey Groves retractor as was described by Verma and Ashworth. It allows full pressure to be applied, which optimises the volume of graft collected in the shortest time possible.

Figure 1 A flat surface is created on the femoral head.

Figure 2 The cancellous bone is reamed.

Figure 3 The femoral neck is resected.