Table 2. Surgical details and postoperative therapy of patients following arthroscopic treatment of hip chondromatosis.

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Authors (year)	Surgical table position	Operative time, minutes, Mean±SD (Range)	Surgical technique	Arthroscopic portals	Postoperative protocol	FU years, Mean±SD (Range)				
Zini et al <sup>17</sup> (2013)	Supine	95 (72-147)	Larger fragments resected with burs or blades. Radiofrequency probes for synovectomy and reducing bleeding	Anterolateral, mid- anterior, posterolateral	WB as tolerated with crutches for 3 weeks. ROM and muscle tone with closed-chain joint stabilization and core strengthening exercises.	22 (12-36)				
Liu et al <sup>26</sup> (2020)	Supine	/	/	Distal anterolateral, anterolateral, anteromedial	Passive ROM was restricted up to 90°. In the first 4 weeks, WB as tolerated with crutches was allowed until full WB was reached.	/				
Lee et al <sup>24</sup> (2012)	Supine	113 (74-156)	Arthroscopic loose body removal with probe or grasper, and smaller loose bodies removed by lavage + synovectomy	Anterior, anterolateral, and posterolateral	Bed rest for 1 to 2 days after surgery. Partial WB started at 2 days and the patients were discharged at 3 to 5 days after surgery	41 (12-133)				
Polesello et al <sup>25</sup> (2015)	Supine	/	/	/	/	17.1 (8-25)				
Boyer and Dorfmann <sup>23</sup> (2008)	Supine	/	Loose bodies removed using probes and/or graspers, some loose bodies were crushed <i>in situ</i> and removed by lavage	Lateral, anterolateral and posterolateral portals,	/	78.6 (12-196)				
Ferro and Philippon <sup>22</sup> (2015)	Supine	/	Loose bodies removed using shaver and grasper or washed. A thorough arthroscopic synovectomy	Anterolateral and mid- anterior	Partial WB for 3 weeks. Stationary bike first day after surgery.	30				
Zhang et al <sup>10</sup> (2021)	Supine	/	Loose bodies removed by lavage, and larger ones removed by grasper	Anterolateral and mid- anterior	/	48.7 (27- 119)				
Marchie et al <sup>11</sup> (2011)	lateral	80 (68-138)	Loose bodies removed by lavage, grasper with morcellization, and electrothermal device for loose bodies removal	Anterosuperior and posterosuperior to the greater trochanter	Fully WB with crutches as tolerated on the same day of the surgical procedure.	64 (12-184)				

Wu et al <sup>20</sup> (2024)	Supine	/	Loose bodies removed by sing a probe or grasper, and smaller loose bodies could be removed by suction	Anterolateral and mid- anterior	Full ROM immediately after surgery. A passive ROM first restored, followed by an active range. Partial WB allowed 2 <sup>nd</sup> day, and full WB allowed after 1 month.	25.2 (18-36)
Bakr et al <sup>21</sup> (2024)	Supine	/	Loose bodies removed by picking it up using grasper, or by saline wash	Proximal and distal anterolateral portals	/	39 (18-60)
Zhu et al <sup>18</sup> (2024)	Supine	/	Removal of loose bodies, and synovectomy	Proximal mid-anterior and mid-anterior	Passive ROM exercises were initiated on day 1. Partial WB exercises for restoring ROM from day 3 to week 3, followed by full WB walking at week 4.	104.9 (96- 139)
Lee et al <sup>19</sup> (2018)	Supine	144 (75-185)	Arthroscopic loose body removal and synovectomy	Anterior, anterolateral, and posterolateral	/	45.6 (12- 81.6)
Zhu et al <sup>9</sup> (2024)	Supine	/	Removal of loose bodies, and synovectomy	Proximal mid-anterior and mid-anterior	Passive ROM exercises were initiated on day 1 to 2 after surgery.  Partial WB exercises for restoring ROM and promoting regular gait were introduced from day 3 to week 3, followed by full WB walking at week 4. Full WB muscle strength exercises and dynamic balance training began at week 6.	40.6±17.6 (24-100)

WB: weight bearing; FU: follow-up; ROM: range of motion.