

Osawa Y, Seki T, Okura T, Takegami Y, Ishiguro N, Hasegawa Y. Long-term outcomes of curved intertrochanteric varus osteotomy combined with bone impaction grafting for non-traumatic osteonecrosis of the femoral head. *Bone Joint J.* 2021;103-B(4):665-671.

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Authors' reply:

3 July 2021

Sir,

We thank Dr Khatri and his colleagues for their interest in our article.¹

In reply to their questions:

First, the way in which the weight-bearing area is evaluated is a difficult problem. As they point out, the weight-bearing area in the figure may differ from the area lateral to the mid-vertical line of the line through the edge of the acetabulum and the bottom of the teardrop. In this study, we used the method of Sugano et al.²

Second, the Harris Hip Score and range of movement are evaluated annually in all patients except those who have undergone conversion to total hip arthroplasty (THA). Only patient-reported outcomes are evaluated using a mailed questionnaire, with 33 patients in the bone impaction grafting (BIG) group and 32 in the curved intertrochanteric varus osteotomy (CVO) group. Excluding the patients converted to THA, the BIG group consisted of 28 patients and the CVO group of 27.

Third, patients who underwent conversion to THA presented with further collapse and osteoarthritic changes. Therefore, all cases of radiological failure were those who had undergone

conversion to THA.

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1. **Osawa Y, Seki T, Okura T, Takegami Y, Ishiguro N, Hasegawa Y.** Long-term outcomes of curved intertrochanteric varus osteotomy combined with bone impaction grafting for non-traumatic osteonecrosis of the femoral head. *Bone Joint J.* 2021;103-B(4):665-671.

2. **Sugano N, Atsumi T, Ohzono K, Kubo T, Hotokebuchi T, Takaoka K.** The 2001 revised criteria for diagnosis, classification, and staging of idiopathic osteonecrosis of the femoral head. *J Orthop Sci.* 2002;7(5):601-605.

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Editor's note: Corrections have since been made to Figures 1 and 3 and Reference 13 in the online version of this April 2021 paper and a corrigenda is available in the September 2021 issue of the Journal which details the corrections made.
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