

Letter to the editor

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Treatment of osteitis pubis: arthrodesis with a new technique regarding two cases and review of the literature

Tratamiento de la osteítis del pubis: artrodesis con nueva técnica a propósito de dos casos y revisión de la literatura

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Dear Editor:

Recently, we read with great interest the article «Treatment of osteitis pubis: arthrodesis with a new technique regarding two cases and review of the literature» by Olucha-Puchol and colleagues, which discusses the surgical treatment of pubic symphysis osteitis in patients aged 65 and above.¹ While we appreciate the authors' efforts to address this complex condition, we believe that several key aspects of the study warrant further discussion.

First, the chosen surgical method (arthrodesis using a subpubic plate, wire suture, and autologous graft) appears highly invasive. Such a procedure, particularly in patients aged 65 and over, carries significant risks of complications. The extensive dissection and placement of hardware in a biomechanically sensitive area could lead to issues such as infection, non-union, or hardware failure. A study by Ganal and Celen demonstrated that minimally invasive arthroscopic techniques carry a lower risk of complications while providing successful mid-term functional outcomes.² Therefore, we believe that less invasive alternatives should be explored and considered (*Figure 1*).

Secondly, the postoperative protocol recommending four weeks of non-weight-bearing movement raises

considerable concerns. Given the advanced age of the patients (65 and 72 years), prolonged immobility significantly increases the risk of complications such as deep vein thrombosis, pulmonary embolism, and muscle atrophy.³ Being unable to walk for four weeks would inevitably result in muscle strength loss in the short term. This immobility not only affects the patients' quality of life but also delays overall recovery.

Additionally, there is growing evidence that minimally invasive surgical techniques may be more appropriate, particularly for elderly patients. It has been shown that arthroscopic treatments shorten recovery time, enable quicker functional recovery, and reduce complication rates.⁴ For this reason, minimally invasive approaches should be investigated further in the treatment of pubic symphysis osteitis.

In conclusion, while the authors have presented a potentially effective technique for managing refractory pubic symphysis osteitis, the invasiveness of the procedure and the prolonged immobility postoperatively raise significant concerns. We advocate for further research into less invasive alternatives, and careful reconsideration of postoperative protocols to minimize complications and accelerate recovery for these patients.

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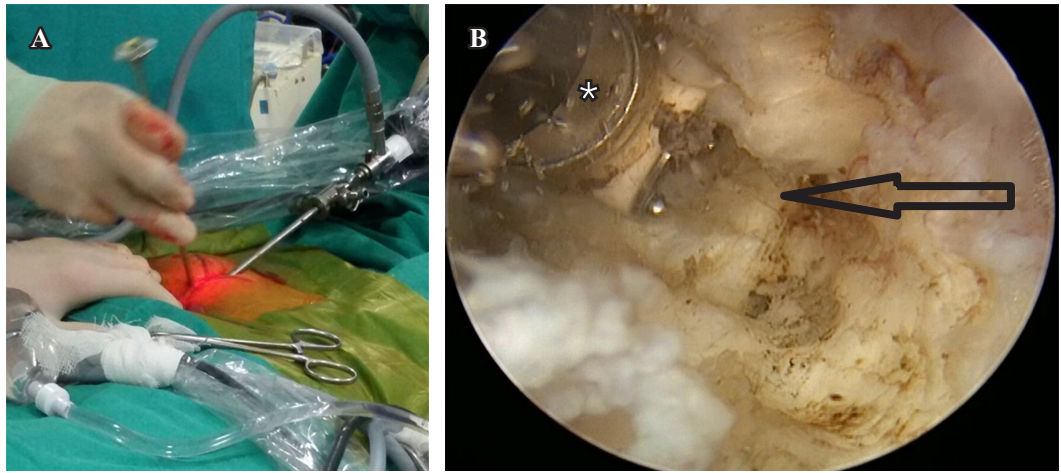


Figure 1:

A) Arthroscopic treatment of a patient with osteitis pubis. **B)** Completed arthroscopic excision of the pubic symphysis joint (black arrow) using shaver and radiofrequency probe (white asterisk).

References

1. Olucha-Puchol J, Rodríguez-Collell JR, Renovell-Ferrer P. Tratamiento de la osteítis del pubis: artrodesis con nueva técnica a propósito de dos casos y revisión de la literatura. *Acta Ortop Mex.* 2024; 38(2): 123-8.
2. Ganal I, Celen ZE. Midterm functional outcomes of arthroscopically treated recalcitrant osteitis pubis in competitive soccer players. *Orthop J Sports Med.* 2023; 11(10): 23259671231203677.
3. Aprisunadi, Nursalam N, Mustikasari M, Ifadah E, Hapsari ED. Effect of early mobilization on hip and lower extremity postoperative: a literature review. *SAGE Open Nurs.* 2023; 9: 23779608231167825.
4. Matsuda DK, Ribas M, Matsuda NA, Domb BG. Multicenter outcomes of endoscopic pubic symphysectomy for osteitis pubis associated with femoroacetabular impingement. *Arthroscopy.* 2015; 31(7): 1255-60.