

Review Period Report

Evidence-Based Clinical Practice Guideline on the Management of Osteoarthritis of the Hip

Table of Contents

Overview of the Review Period	3
Reviewer Key	4
Table 1. Reviewer Key.....	4
Reviewer Demographics	5
Table 2: Reviewer Demographics	5
Reviewers' Disclosure Information.....	6
Table 3. Disclosure Question Key.....	6
Table 4. Reviewer's Disclosure Information	7
Reviewer Responses to Structured Review Form Questions	8
Table 5. Reviewer Responses to Structured Review Questions 1-4.....	8
Table 6. Reviewer Responses to Structured Review Questions 5-8.....	9
Table 7. Reviewer Responses to Structured Review Questions 9-12.....	10
Table 8. Reviewer Responses to Structured Review Questions 13-16.....	11
Reviewer Detailed Responses and Editorial Suggestions	13
Reviewer #1, Gustavo Almeida, PT, PhD.....	13
<i>Workgroup Response to Reviewer #1</i>	14
Reviewer #2, James Stensby, MD	15
<i>Workgroup Response to Reviewer #2</i>	16
Reviewer #3, Olalekan Omolola, MD, MBA	17
<i>Workgroup Response to Reviewer #3</i>	18
Reviewer #4, Christopher Belyea, MD, MBA	19

Appendix A – Structured Review Form

Review Questions (REQUIRED)

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The overall objective(s) of the guideline is (are) specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The health question(s) covered by the guideline is (are) specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The guideline's target audience is clearly described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. There is an explicit link between the recommendations and the supporting evidence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Given the nature of the topic and the data, all clinically important outcomes are considered.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The patients to whom this guideline is meant to apply are specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The criteria used to select articles for inclusion are appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The reasons why some studies were excluded are clearly described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. All important studies that met the article inclusion criteria are included.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. The validity of the studies is appropriately appraised.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. The methods are described in such a way as to be reproducible.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. The statistical methods are appropriate to the material and the objectives of this guideline.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Important parameters (e.g., setting, study population, study design) that could affect study results are systematically addressed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Health benefits, side effects, and risks are adequately addressed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. The writing style is appropriate for health care professionals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. The grades assigned to each recommendation are appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Management of Osteoarthritis of the Hip

Overview of the Review Period

The reviews and comments related to this clinical practice guideline are reprinted in this document and posted on the AAOS website. All reviewers are required to disclose their conflict of interests.

Review Process:

AAOS contacted 4 organizations with content expertise to review a draft of the clinical practice guideline during the three-week peer review period in September 2023.

Additionally, the draft was also provided to members of the AAOS Board of Directors (BOD), members of the Research and Quality Council (RQC), members of the Board of Councilors (BOC), members of the Board of Specialty Societies (BOS) and members of the Committee on Evidence-Based Quality and Value (EBQV) for review and comment.

- Four (4) individuals provided comments via the electronic structured peer review form. No reviewers asked to remain anonymous.
- All four reviews were on behalf of a society and/or committee.
- The work group considered all comments and made some modifications when they were consistent with the evidence.

Reviewer Key

Each reviewer was assigned a number (see below). All responses in this document are listed by the assigned peer reviewer's number.

Table 1. Reviewer Key

Reviewer Number	Name of Reviewer	Society/ Committee Being Represented
1	Gustavo Almeida	American Physical Therapy Association
2	James Stensby	American College of Radiology
3	Olalekan Omolola	3M
4	Christopher Belyea	AAOS Board of Councilors

Reviewer Demographics

Table 2: Reviewer Demographics

Reviewer Number	Name of Reviewer	Primary Specialty	Work Setting
1	Gustavo Almeida	Rehab/Prosthetics and Orthotics	Academic Practice
2	James Stensby	Other	Private Group or Practice
3	Olalekan Omolola	Other	Other
4	Christopher Belyea	Hand	Military

Reviewers' Disclosure Information

All reviewers are required to disclose any possible conflicts that would bias their review via a series of 10 questions (see Table 3). For any positive responses to the questions (i.e., "Yes"), the reviewer was asked to provide details on their possible conflict.

Table 3. Disclosure Question Key

Disclosure Question	Disclosure Question Details
A	A) Do you or a member of your immediate family receive royalties for any pharmaceutical, biomaterial or orthopaedic product or device?
B	B) Within the past twelve months, have you or a member of your immediate family served on the speakers bureau or have you been paid an honorarium to present by any pharmaceutical, biomaterial or orthopaedic product or device company?
C	C) Are you or a member of your immediate family a PAID EMPLOYEE for any pharmaceutical, biomaterial or orthopaedic device or equipment company, or supplier?
D	D) Are you or a member of your immediate family a PAID CONSULTANT for any pharmaceutical, biomaterial or orthopaedic device or equipment company, or supplier?
E	E) Are you or a member of your immediate family an UNPAID CONSULTANT for any pharmaceutical, biomaterial or orthopaedic device or equipment company, or supplier?
F	F) Do you or a member of your immediate family own stock or stock options in any pharmaceutical, biomaterial or orthopaedic device or equipment company, or supplier (excluding mutual funds)
G	G) Do you or a member of your immediate family receive research or institutional support as a principal investigator from any pharmaceutical, biomaterial or orthopaedic device or equipment company, or supplier?
H	H) Do you or a member of your immediate family receive any other financial or material support from any pharmaceutical, biomaterial or orthopaedic device and equipment company or supplier?
I	I) Do you or a member of your immediate family receive any royalties, financial or material support from any medical and/or orthopaedic publishers?
J	J) Do you or a member of your immediate family serve on the editorial or governing board of any medical and/or orthopaedic publication?

Table 4. Reviewer's Disclosure Information

Reviewer Number	Name of Reviewer	Disclosure Available via AAOS Disclosure System	A	B	C	D	E	F	G	H	I	J
1	Gustavo Almeida	No	No	No	No	No	No	No	No	No	No	No
2	James Stensby	No	No	No	No	No	No	No	No	No	No	No
3	Olalekan Omolola	No	No	No	No	No	No	No	No	No	No	No
4	Christopher Belyea	Yes										

Reviewer Responses to Structured Review Form Questions

All reviewers are asked 16 structured review questions which have been adapted from the Appraisal of Guidelines for Research and Evaluation (AGREE) II Criteria*. Their responses to these questions are listed on the next few pages.

Table 5. Reviewer Responses to Structured Review Questions 1-4

Reviewer Number	Name of Reviewer	1. The overall objective(s) of the guideline is (are) specifically described.	2. The health question(s) covered by the guideline is (are) specifically described.	3. The guideline's target audience is clearly described.	4. There is an explicit link between the recommendations and the supporting evidence.
1	Gustavo Almeida, PT, PhD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
2	James Stensby, MD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
3	Olalekan Omolola, MD, MBA	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
4	Christopher Belyea, MD, MBA	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree

Table 6. Reviewer Responses to Structured Review Questions 5-8

Reviewer Number	Name of Reviewer	5. Given the nature of the topic and the data, all clinically important outcomes are considered.	6. The patients to whom this guideline is meant to apply are specifically described.	7. The criteria used to select articles for inclusion are appropriate.	8. The reasons why some studies were excluded are clearly described.
1	Gustavo Almeida, PT, PhD	Strongly Agree	Strongly Agree	Strongly Agree	Disagree
2	James Stensby, MD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
3	Olalekan Omolola, MD, MBA	Agree	Strongly Agree	Strongly Agree	Agree
4	Christopher Belyea, MD, MBA	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree

Table 7. Reviewer Responses to Structured Review Questions 9-12

Reviewer Number	Name of Reviewer	9. All important studies that met the article inclusion criteria are included	10. The validity of the studies is appropriately appraised.	11. The methods are described in such a way as to be reproducible	12. The statistical methods are appropriate to the material and the objectives of this guideline
1	Gustavo Almeida, PT, PhD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
2	James Stensby, MD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
3	Olalekan Omolola, MD, MBA	Agree	Agree	Strongly Agree	Strongly Agree
4	Christopher Belyea, MD, MBA	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree

Table 8. Reviewer Responses to Structured Review Questions 13-16

Reviewer Number	Name of Reviewer	13. Important parameters (e.g., setting, study population, study design) that could affect study results are systematically addressed.	14. Health benefits, side effects, and risks are adequately addressed.	15. The writing style is appropriate for health care professionals.	16. The grades assigned to each recommendation are appropriate.
1	Gustavo Almeida, PT, PhD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
2	James Stensby, MD	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree
3	Olalekan Omolola, MD, MBA	Agree	Strongly Agree	Strongly Agree	Agree
4	Christopher Belyea, MD, MBA	Strongly Agree	Strongly Agree	Strongly Agree	Strongly Agree

Reviewers' Recommendation for Use of this Guideline in Clinical Practice

Would you recommend these guidelines for use in clinical practice?

Reviewer Number	Name of Reviewer	Would you recommend these guidelines for use in clinical practice?
1	Gustavo Almeida, PT, PhD	Recommend
2	James Stensby, MD	Strongly Recommend
3	Olalekan Omolola, MD, MBA	Recommend
4	Christopher Belyea, MD, MBA	Strongly Recommend

Reviewer Detailed Responses and Editorial Suggestions

Reviewer #1, Gustavo Almeida, PT, PhD

Reviewer Number	Reviewer Name	Society or committee you are representing	Please provide a brief explanation of both your positive and negative answers in the preceding section. If applicable, please specify the draft page and line numbers in your comments. Please feel free to also comment on the overall structure and content of the Guideline: The response(s) below also includes all editing suggestions received from the Additional Comments section of the structured review form.
1	Gustavo Almeida, PT, PhD	American Physical Therapy Association	<p>A. The flow of this CPG is easy to follow in its current format. The additional information provided in the appendices is very helpful for the reader to understand why so many articles were excluded from the review, and the statistical methodology used to judge the results of included studies. However, the "Reason for Exclusion" for a lot of studies in the "CPG eAppendix 1" is unclear (pp. 6-10).</p> <p>B. Also, why were so many studies on PHYSICAL ACTIVITY left out? A lot of the "Reason for Exclusion" were left blank, but some reasons were stating "no PT". Physical activity participation is a very relevant outcome when comparing interventions and should be discussed further.</p> <p>C. This reviewer appreciates the careful work done and the attention to detail displayed by the group.</p> <p>D. Appropriately written for the target audience, addresses clinically relevant questions, methodology is clear.</p> <p>E. "This reviewer was wondering why an important outcome such as physical activity was barely discussed. I understand that some data was reported under physical therapy interventions. However, patients can become more (or less) physically active after a surgical or pharmacological intervention as well.</p> <p>I believe that physical activity is a very relevant outcome when comparing interventions and should be discussed further. We are all doing our best to keep our patients active following the WHO recommendations for those with OA because we know the consequences of being physically inactive. "</p>

Workgroup Response to Reviewer #1

Dear Gustavo Almeida, PT, PhD,

Thank you for your expert review of the Management of Osteoarthritis of the Hip Evidence-Based Clinical Practice Guideline. We will address your comments by guideline section in the order that you listed them.

- A. Thank you for your feedback, AAOS Staff has revised the Appendix 1 to address unclear or missing reasons for exclusions.
- B. Staff have revised the blank reasons for exclusion. Any articles that were excluded due to "no PT" were done so if PT was a requirement for answering the PICO question and is not relevant for any other PICO questions. Physical activity outcomes were extracted where available, along with clinical and functional outcomes.
- C. Thank you for the positive feedback.
- D. Thank you for the positive feedback.
- E. The outcomes of interest were established a priori during the Introductory; if measures of physical activities were not included during the PICO construction, the reviewing staff did not extract those data.

Reviewer #2, James Stensby, MD

Reviewer Number	Reviewer Name	Society or committee you are representing	Please provide a brief explanation of both your positive and negative answers in the preceding section. If applicable, please specify the draft page and line numbers in your comments. Please feel free to also comment on the overall structure and content of the Guideline: The response(s) below also includes all editing suggestions received from the Additional Comments section of the structured review form.
2	James Stensby, MD	American College of Radiology	A. Appropriately written for the target audience, addresses clinically relevant questions, methodology is clear.

Workgroup Response to Reviewer #2

Dear James Stensby, MD,

Thank you for your expert review of the Management of Osteoarthritis of the Hip Evidence-Based Clinical Practice Guideline. We will address your comments by guideline section in the order that you listed them.

A. Thank you for the positive feedback.

Reviewer #3, Olalekan Omolola, MD, MBA

Reviewer Number	Reviewer Name	Society or committee you are representing	Please provide a brief explanation of both your positive and negative answers in the preceding section. If applicable, please specify the draft page and line numbers in your comments. Please feel free to also comment on the overall structure and content of the Guideline: The response(s) below also includes all editing suggestions received from the Additional Comments section of the structured review form.
3	Olalekan Omolola, MD, MBA	3M	A. This CPG did not address biological treatments' effectiveness and safety, such as platelet-rich plasma (PRP) and stem cell therapies in hip osteoarthritis management. The team should consider addressing this in future reviews.

Workgroup Response to Reviewer #3

Dear Olalekan Omolola, MD, MBA,

Thank you for your expert review of the Management of Osteoarthritis of the Hip Evidence-Based Clinical Practice Guideline. We will address your comments by guideline section in the order that you listed them.

A. Thank you for your feedback. Future CPG development workgroups certainly will discuss biologic treatments during PICO construction. However, discussion of the topic does not guarantee its inclusion as all PICO questions are voted upon for approval during the Introductory Meeting.

Reviewer #4, Christopher Belyea, MD, MBA

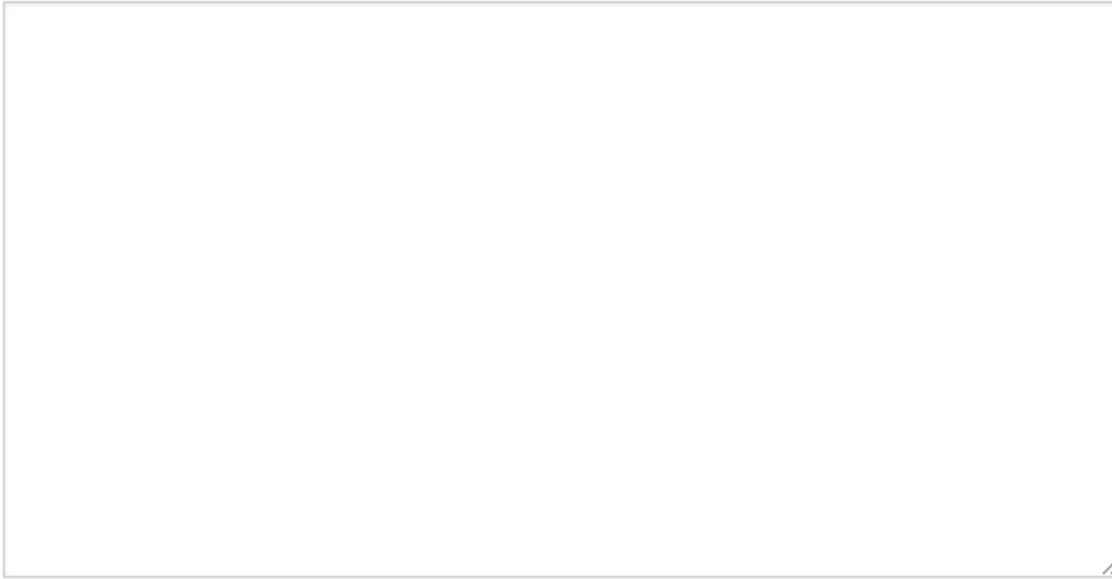
Reviewer Number	Reviewer Name	Society or committee you are representing	Please provide a brief explanation of both your positive and negative answers in the preceding section. If applicable, please specify the draft page and line numbers in your comments. Please feel free to also comment on the overall structure and content of the Guideline: The response(s) below also includes all editing suggestions received from the Additional Comments section of the structured review form.
4	Christopher Belyea, MD, MBA	AAOS Board of Councilors	No comments.

Appendix A – Structured Review Form

Review Questions (REQUIRED)

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The overall objective(s) of the guideline is (are) specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The health question(s) covered by the guideline is (are) specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The guideline's target audience is clearly described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. There is an explicit link between the recommendations and the supporting evidence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Given the nature of the topic and the data, all clinically important outcomes are considered.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The patients to whom this guideline is meant to apply are specifically described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The criteria used to select articles for inclusion are appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The reasons why some studies were excluded are clearly described.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. All important studies that met the article inclusion criteria are included.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. The validity of the studies is appropriately appraised.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. The methods are described in such a way as to be reproducible.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. The statistical methods are appropriate to the material and the objectives of this guideline.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Important parameters (e.g., setting, study population, study design) that could affect study results are systematically addressed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Health benefits, side effects, and risks are adequately addressed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. The writing style is appropriate for health care professionals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. The grades assigned to each recommendation are appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide a brief explanation of both your positive and negative answers in the preceding section. If applicable, please specify the draft page and line numbers in your comments. Please feel free to also comment on the overall structure and content of the Guideline:



Would you recommend these guidelines for use in clinical practice? (REQUIRED)

- Strongly Recommend
- Recommend
- Would Not Recommend
- Unsure

Additional Comments regarding this clinical practice guideline?

