

Taperloc/M2a^{MoM} Total Conventional Hip Investigation

Note: This analysis compares the Taperloc/M2a^{MoM} femoral stem/acetabular combination with all other total conventional hip prostheses.

This combination has been identified as having a significantly higher rate of revision. For a detailed explanation of the process used by the Registry that results in identification of prostheses that have a higher than anticipated rate of revision please refer to the Prostheses with Higher than Anticipated Rates of Revision chapter of the most recent AOANJRR Annual Report, <https://aoanjrr.sahmri.com/annual-reports-2026>.

Note: Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator. Procedures using prostheses with no recorded use in 2025 are excluded from the comparator.

TABLE 1

Revision Rate of Primary Total Conventional Hip Replacement

The revision rate of the Taperloc/M2a^{MoM} total conventional hip combination is compared to all other total conventional hip prostheses.

Table 1: Revision Rates of Primary Total Conventional Hip Replacement

Component	N Revised	N Total	Obs. Years	Revisions/100 Obs. Yrs (95% CI)
Taperloc/M2a ^{MoM}	77	515	7528	1.02 (0.81, 1.28)
Other Total Conventional Hip	19701	568612	3623071	0.54 (0.54, 0.55)
TOTAL	19778	569127	3630599	0.54 (0.54, 0.55)

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

TABLE 2

Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement

The yearly cumulative percent revision of the Taperloc/M2a^{MoM} total conventional hip combination is compared to all other total conventional hip prostheses.

Table 2: Yearly Cumulative Percent Revision (95% CI) of Primary Total Conventional Hip Replacement

CPR	1 Yr	2 Yrs	3 Yrs	4 Yrs	5 Yrs	6 Yrs
Taperloc/M2a ^{MoM}	1.8 (0.9, 3.3)	2.9 (1.8, 4.8)	4.3 (2.9, 6.5)	6.2 (4.4, 8.6)	7.4 (5.4, 10.0)	8.2 (6.1, 11.0)
Other Total Conventional Hip	1.7 (1.7, 1.8)	2.1 (2.1, 2.2)	2.5 (2.4, 2.5)	2.8 (2.7, 2.8)	3.0 (3.0, 3.1)	3.3 (3.2, 3.3)

CPR	7 Yrs	8 Yrs	9 Yrs	10 Yrs	11 Yrs	12 Yrs
Taperloc/M2a ^{MoM}	9.1 (6.8, 12.0)	10.1 (7.8, 13.2)	11.7 (9.1, 14.9)	12.4 (9.7, 15.6)	13.5 (10.8, 16.9)	14.2 (11.4, 17.7)
Other Total Conventional Hip	3.5 (3.5, 3.6)	3.8 (3.7, 3.9)	4.1 (4.0, 4.2)	4.4 (4.3, 4.5)	4.7 (4.6, 4.8)	5.1 (5.0, 5.2)

CPR	13 Yrs	14 Yrs	15 Yrs	16 Yrs	17 Yrs	18 Yrs
Taperloc/M2a ^{MoM}	14.5 (11.6, 18.0)	14.8 (11.8, 18.3)	15.3 (12.3, 18.9)	15.6 (12.6, 19.2)	15.6 (12.6, 19.2)	15.9 (12.9, 19.6)
Other Total Conventional Hip	5.4 (5.3, 5.5)	5.8 (5.7, 5.9)	6.2 (6.1, 6.3)	6.6 (6.5, 6.7)	7.0 (6.8, 7.1)	7.3 (7.1, 7.5)

CPR	19 Yrs	20 Yrs	21 Yrs	22 Yrs	23 Yrs	24 Yrs	25 Yrs
Taperloc/M2a ^{MoM}	16.4 (13.2, 20.2)	17.0 (13.7, 21.0)	17.7 (14.2, 21.9)				
Other Total Conventional Hip	7.7 (7.5, 7.9)	8.0 (7.8, 8.2)	8.6 (8.3, 8.9)	9.0 (8.7, 9.4)	9.6 (9.1, 10.0)	9.6 (9.2, 10.1)	10.3 (9.4, 11.2)

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

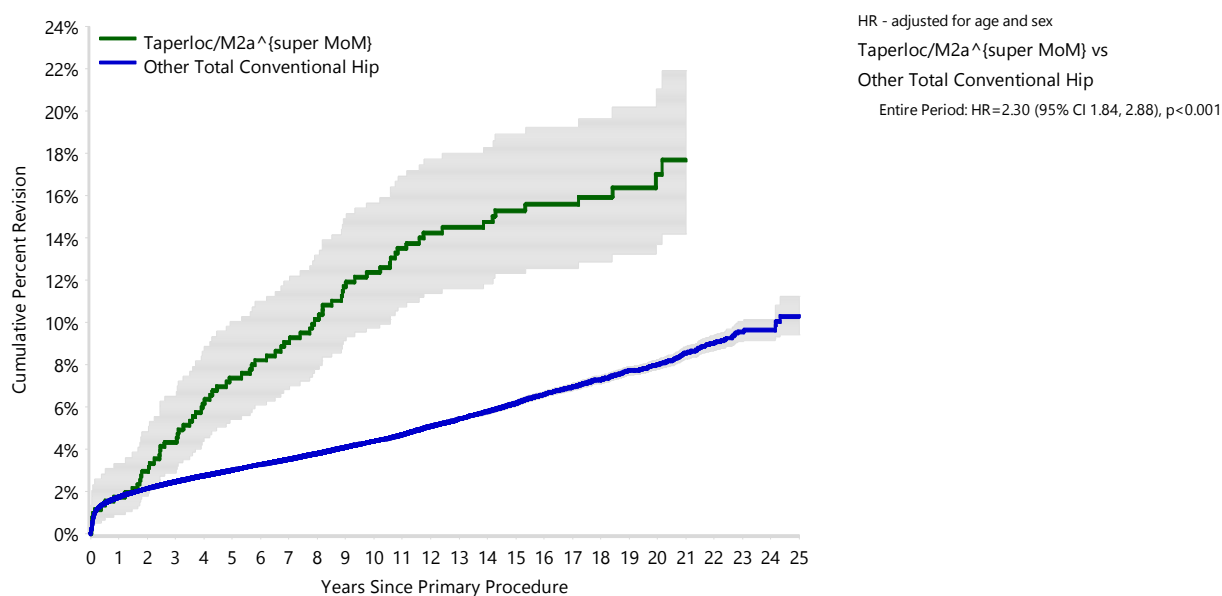
FIGURE 1

Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement

The yearly cumulative percent revision of the Taperloc/M2a^{MoM} total conventional hip combination is compared to all other total conventional hip prostheses. In addition, hazard ratios are reported.

Hazard ratios are reported for specific time periods during which the hazard ratio is constant. This is done to enable more specific and valid comparisons of the risk of revision over time. The pattern of variation in risk has important implications with respect to the underlying reasons for any difference.

Figure 1: Cumulative Percent Revision of Primary Total Conventional Hip Replacement



Number at Risk	0 Yr	1 Yr	2 Yrs	3 Yrs	4 Yrs	5 Yrs	6 Yrs	7 Yrs
Taperloc/M2a ^{MoM}	515	500	489	478	461	451	441	424
Other Total Conventional Hip	568612	501603	445433	391564	344389	299354	259516	220948

Number at Risk	8 Yrs	9 Yrs	10 Yrs	11 Yrs	12 Yrs	13 Yrs	14 Yrs	15 Yrs	16 Yrs
Taperloc/M2a ^{MoM}	409	397	386	374	349	332	318	306	284
Other Total Conventional Hip	185798	153739	124848	99575	79802	63343	49730	38033	28355

Number at Risk	17 Yrs	18 Yrs	19 Yrs	20 Yrs	21 Yrs	22 Yrs	23 Yrs	24 Yrs	25 Yrs
Taperloc/M2a ^{MoM}	250	201	165	131	89	38	6	0	0
Other Total Conventional Hip	20437	14638	10400	7396	4859	2863	1455	560	95

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

TABLE 3**Primary Diagnosis for Revised Primary Total Conventional Hip Replacement**

This table identifies the diagnosis of the primary procedure which was subsequently revised. This information is provided as there is a variation on outcome depending on the primary diagnosis. It is therefore important when considering the reasons for a higher than anticipated rate of revision that there is identification of the primary diagnosis. This information should be compared to the primary diagnosis for the revisions of all other total conventional hip prostheses.

Table 3: Primary Diagnosis for Revised Primary Total Conventional Hip Replacement

Primary Diagnosis	Taperloc/M2a ^{MoM}		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Osteoarthritis	70	90.9	16296	82.7
Fractured Neck Of Femur	3	3.9	1521	7.7
Osteonecrosis	2	2.6	844	4.3
Developmental Dysplasia	2	2.6	321	1.6
Rheumatoid Arthritis			201	1.0
Failed Internal Fixation			165	0.8
Tumour			157	0.8
Other Inflammatory Arthritis			102	0.5
Fracture/Dislocation			60	0.3
Other			21	0.1
Arthrodesis Takedown			13	0.1
TOTAL	77	100.0	19701	100.0

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

TABLE 4

Reasons for Revision

This is reported in two ways: a percentage of primary procedures revised and as a percentage of all revision procedures.

% Primaries Revised: This shows the proportional contribution of each revision diagnosis as a percentage of the total number of primary procedures. This percentage can be used to approximate the risk of being revised for that diagnosis. Differing percentages between groups, with the same distribution of follow up time, may identify problems of concern.

% Revisions: The number of revisions for each diagnosis is expressed as a percentage of the total number of revisions. This shows the distribution of reasons for revision within a group but cannot be used as a comparison between groups.

Table 4: Primary Total Conventional Hip Replacement - Reason for Revision (Follow-up Limited to 23.2 Years)

Revision Diagnosis	Taperloc/M2a ^{MoM}			Other Total Conventional Hip		
	Number	% Primaries Revised	% Revisions	Number	% Primaries Revised	% Revisions
Infection	8	1.6	10.4	5017	0.9	25.5
Prosthesis Dislocation/Instability	6	1.2	7.8	4382	0.8	22.2
Fracture	4	0.8	5.2	4348	0.8	22.1
Loosening	24	4.7	31.2	3627	0.6	18.4
Pain	1	0.2	1.3	340	0.1	1.7
Leg Length Discrepancy				307	0.1	1.6
Malposition	1	0.2	1.3	282	0.0	1.4
Implant Breakage Stem	1	0.2	1.3	211	0.0	1.1
Lysis	11	2.1	14.3	200	0.0	1.0
Implant Breakage Acetabular Insert				128	0.0	0.6
Wear Acetabular Insert				112	0.0	0.6
Incorrect Sizing				96	0.0	0.5
Metal Related Pathology	20	3.9	26.0	93	0.0	0.5
Implant Breakage Acetabular				73	0.0	0.4
Wear Head				49	0.0	0.2
Tumour				46	0.0	0.2
Heterotopic Bone				26	0.0	0.1
Implant Breakage Head				26	0.0	0.1
Wear Acetabulum				6	0.0	0.0
Osteonecrosis				4	0.0	0.0
Synovitis				2	0.0	0.0
Progression Of Disease				1	0.0	0.0
Other	1	0.2	1.3	322	0.1	1.6
N Revision	77	15.0	100.0	19698	3.5	100.0
N Primary	515			568612		

Note: This table is restricted to revisions within 23.2 years for all groups to allow a time-matched comparison of revisions.

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

FIGURE 2

Cumulative Incidence Revision Diagnosis of Primary Total Conventional Hip Replacement

This figure details the cumulative incidence of the most common reasons for revision. The five most common reasons for revision are included as long as each of these reasons account for more than 10 procedures or at least 5% of all revisions for the Taperloc/M2a^{MoM} total conventional hip combination. A comparative graph is provided of the cumulative incidence for the same reasons for revisions for all other total conventional hip prostheses.

Figure 2: Cumulative Incidence Revision Diagnosis for Primary Total Conventional Hip Replacement

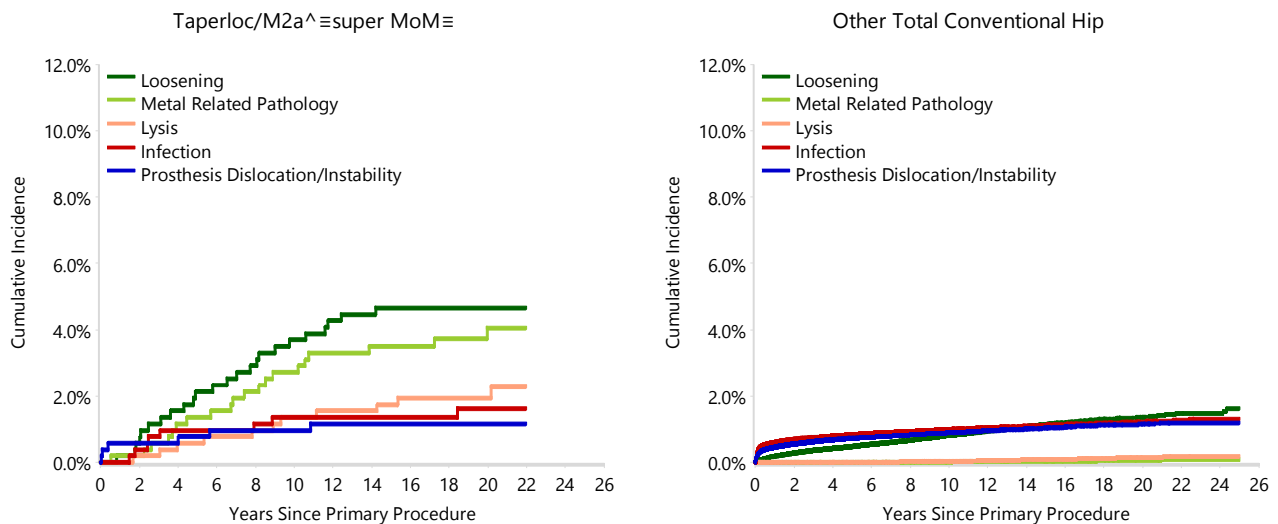


TABLE 5

Type of Revision Performed for Primary Total Conventional Hip Replacement

This analysis identifies the components used in the revision of the Taperloc/M2a^{MoM} total conventional hip combination and compares it to the components used in the revision of all other total conventional hip prostheses.

The reason this analysis is undertaken is to identify whether there is one or more components which are being replaced that differ from the components replaced for revisions of all other total conventional hip prostheses i.e. is there a difference in the type of revision undertaken for the Taperloc/M2a^{MoM} total conventional hip combination compared to all other total conventional hip prostheses.

Table 5: Primary Total Conventional Hip Replacement - Type of Revision (Follow-up Limited to 23.2 Years)

Type of Revision	Taperloc/M2a ^{MoM}		Other Total Conventional Hip	
	Number	Percent	Number	Percent
Femoral Component	4	5.2	6645	33.7
Acetabular Component	48	62.3	3310	16.8
THR (Femoral/Acetabular)	15	19.5	2303	11.7
Cement Spacer	4	5.2	556	2.8
Removal of Prostheses			93	0.5
Reinsertion of Components			27	0.1
Total Femoral			12	0.1
Bipolar Head and Femoral			10	0.1
N Major	71	92.2	12956	65.8
Head/Insert	6	7.8	5372	27.3
Head Only			914	4.6
Minor Components			285	1.4
Insert Only			168	0.9
Bipolar Only			1	0.0
Cement Only			1	0.0
Head/Neck/Insert			1	0.0
N Minor	6	7.8	6742	34.2
TOTAL	77	100.0	19698	100.0

Note: This table is restricted to revisions within 23.2 years for all groups to allow a time-matched comparison of revisions.

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

TABLE 6**Revision Rates of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Fixation**

This analysis is provided as some prostheses have more than one fixation option. Additionally there are prostheses where an alternative to the recommended approach to fixation was used e.g. a cementless prosthesis that has been cemented or vice-versa.

Table 6: Revised Number of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Fixation

Fixation	N Revised	N Total
Cementless	76	512
Hybrid (Femur Cemented)	0	1
Reverse Hybrid (Femur Cementless)	1	2
TOTAL	77	515

TABLE 7**Revision Rates of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Bearing Surface**

This analysis is provided as some prostheses are combined with a variety of bearing surfaces. All bearing surfaces used with this combination are listed.

Table 7: Revised Number of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Bearing Surface

Bearing Surface	N Revised	N Total
Metal/Metal	77	515
TOTAL	77	515

TABLE 8

Revision Rates of Primary Total Conventional Hip Replacement by State

This enables a state by state variation to be identified for the Taperloc/M2a^{MoM} total conventional hip combination and provides the comparative data for each of the states for all other total conventional hip prostheses.

The purpose of this analysis is to determine if the higher than anticipated rate of revision has widespread distribution between states. If there is widespread distribution then the reason for the higher than anticipated rate of revision is unlikely to be surgeon specific. If the prosthesis has been used in only a small number of states it is not possible to distinguish if the higher than anticipated rate of revision is related to the prosthesis, surgeon, technique or patient.

Table 8: Revised Number of Primary Total Conventional Hip Replacement by State

Component	State	N Revised	N Total
Taperloc/M2a ^{MoM}	NSW	10	32
	VIC	61	454
	QLD	4	19
	SA	2	6
	TAS	0	4
Other Total Conventional Hip	NSW	5507	167002
	VIC	4853	146558
	QLD	3968	104359
	WA	2510	64946
	SA	1887	52084
	TAS	439	18269
	ACT/NT	537	15394
TOTAL		19778	569127

Note: Prostheses no longer used in 2025 are excluded from the comparator. Procedures using metal/metal prostheses with head size larger than 32mm are excluded from the comparator.

TABLE 9**Number of Revisions of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Year of Implant**

This analysis details the number of prostheses reported each year to the Registry for the Taperloc/M2a^{MoM} total conventional hip combination. It also provides the subsequent number of revisions of the primaries reported in that year.

Primary procedures performed in later years have had less follow up time therefore the number revised is expected to be less than the number revised in earlier years. For example, a primary procedure performed in 2025 has a maximum of one year to be revised, whereas a primary procedure performed in 2023 has a maximum of three years to be revised.

Table 9: Number of Revisions of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Year of Implant

Year of Implant	Number Revised	Total Number
2002	3	18
2003	10	79
2004	16	113
2005	9	74
2006	4	38
2007	9	43
2008	13	76
2009	8	49
2010	5	23
2011	0	2
TOTAL	77	515

TABLE 10

Revision Rates of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Catalogue Number Range

Many prostheses have a number of catalogue ranges. The catalogue range is specific to particular design features; more than one catalogue range usually indicates a minor difference in design in a particular Taperloc/M2a^{MoM} prosthesis.

This analysis has been undertaken to determine if the revision rate varies according to the catalogue number range.

Model	Catalogue Range	Catalogue Description	Cement	Material	Coating	Fixation
Femoral Stem						
Taperloc	103200-103211	MODULAR TAPERLOC FEMORAL POROUS COATED	NO	METAL	HA COATED	POROUS
Taperloc	103800-103805	MODULAR POROUS TAPERLOC FEMORAL STEM	NO	METAL	HA COATED	POROUS
Taperloc	103807-103812	MODULAR POROUS LATERALIZED TAPERLOC FEMORAL STEM	NO	METAL		POROUS
Taperloc	11103200-11103211	MODULAR LATERALIZED TAPERLOC FEMORAL POROUS COATED STEM	NO	METAL	HA COATED	POROUS
Taperloc	12103206-12103212	MODULAR TAPERLOC FEMORAL REDUCE DISTAL/POROUS COATED	NO	METAL		
Taperloc	13103206-13103212	MODULAR POROUS LATERALIZED REDUCE DISTAL TAPERLOC FEMORAL STEM	NO	METAL		
Taperloc	164400-164405	TAPERLOC HIP PRIMARY FEMORAL POROUS COATED STEM	NO	METAL	HA COATED	POROUS
Taperloc	21103202-21103210	HAP MODULAR TAPERLOC FEMORAL STEM/POROUS COATED	NO	METAL	HA COATED	
Taperloc	21123202-21123210	HAP MODULAR TAPERLOC FEMORAL LATERALIZED STEM/POROUS COATED	NO	METAL	HA COATED	
Acetabular						
M2a	15105048-15105070	POROUS FLARED ONE PIECE CUP	NO	METAL		
M2a	15106048-15106070	POROUS NON FLARED ONE PIECE CUP	NO	METAL		
M2a	RD118848-RD118870	M2A ONE PIECE POROUS	NO	METAL		POROUS
M2a	US257844-US257866	MAGNUM TRI-SPIKE CUP	NO	METAL		

Table 10: Revised Number of Taperloc/M2a^{MoM} Primary Total Conventional Hip Replacement by Catalogue Number Range

Femoral Stem Range	Acetabular Range	N Revised	N Total
103200-103211	15105048-15105070	0	9
	RD118848-RD118870	8	96
103800-103805	RD118848-RD118870	2	5
103807-103812	RD118848-RD118870	1	9
11103200-11103211	15105048-15105070	4	19
	15106048-15106070	1	2
	RD118848-RD118870	22	116
12103206-12103212	15105048-15105070	1	3
	US257844-US257866	0	4
13103206-13103212	15105048-15105070	2	23
	RD118848-RD118870	1	4
	US257844-US257866	0	1
164400-164405	RD118848-RD118870	0	6
21103202-21103210	15105048-15105070	3	22
	15106048-15106070	0	1
	RD118848-RD118870	0	16
	US257844-US257866	3	9
21123202-21123210	15105048-15105070	16	100
	RD118848-RD118870	12	65
	US257844-US257866	1	5
TOTAL		77	515