



SHALYA
ORTHOPAEDIC HOSPITAL &
JOINT REPLACEMENT CENTRE



**EUROPEAN
ANTERIOR
HIP MEETING**

European Anterior Hip Meeting (EAHM)

Tensor Fasciae Latae Twitch Sign as a Dynamic Landmark for Identification of the Hueter Interval

During Minimally Invasive Direct Anterior Hip Arthroplasty



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Introduction / Purpose

- DAA - Hueter interval and offers muscle-sparing advantages.
- Accurate Interval Identification is critical.

Why this matters

- Wrong Interval in DAA leads to dreaded complications like Femoral Nerve Palsy specially in Early Learning Curve
- Existing landmarks – Static and Visual (Fascial Colour, Fascial Pooling, and the TFL perforator) may be unclear.
- Reliability decreases in Fracture Scenario, Obesity, Limited Exposure, Neuromuscular Hip where colour is not constant finding
- Dynamic confirmation improves confidence

Objective

- To introduce and validate the Tensor Fasciae Latae (TFL) Twitch Sign as a simple, dynamic, and reproducible method for Intra-Operative identification of the Hueter interval in minimally invasive direct anterior hip arthroplasty



Method

Study Design

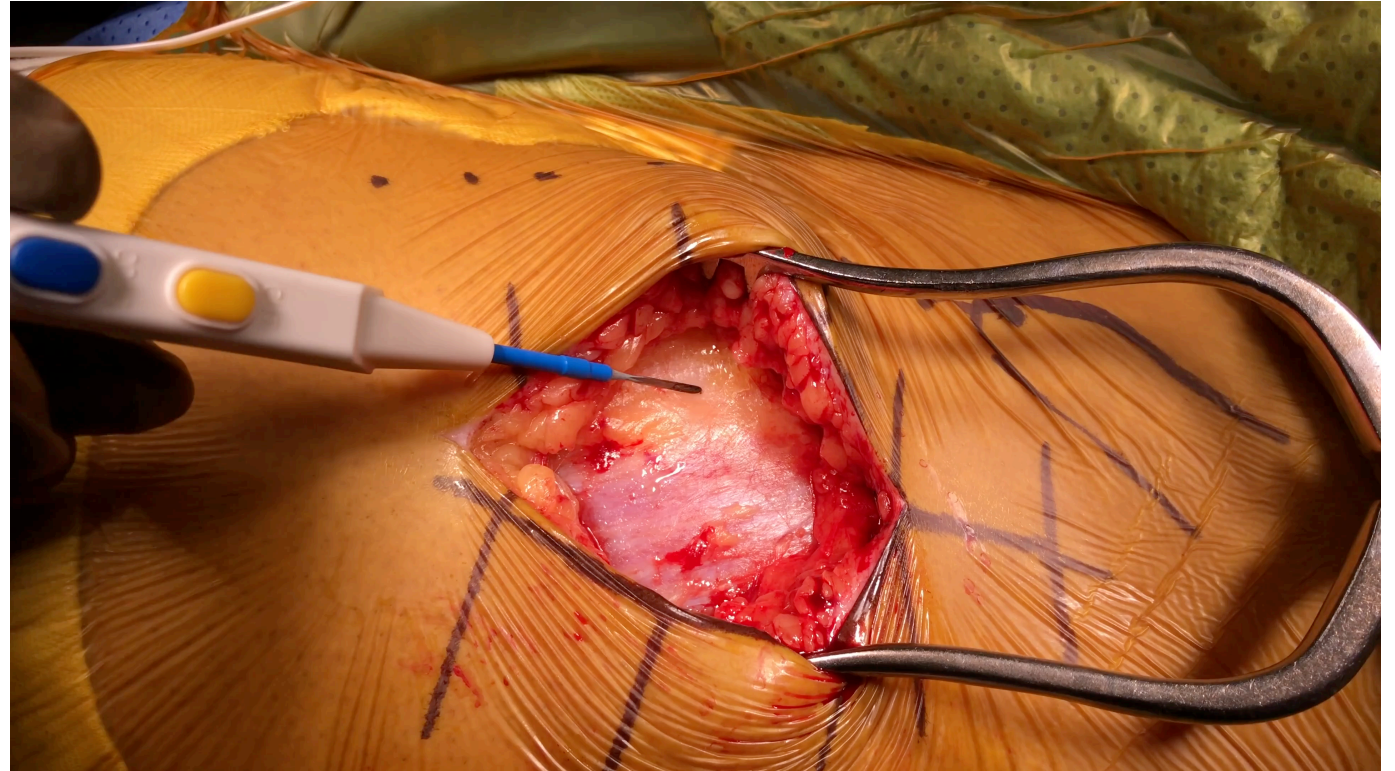
- Consecutive Observational series | Single institution
- 100 DAA procedures | January – April 2026
- All performed under spinal anaesthesia

Technique — The TFL Twitch Sign

- 4-STEP WORKFLOW
- Step - 1. Identify TFL belly
- Step - 2. Apply Monopolar cautery
- Step - 3. Observe Twitch
- Step - 4. Enter Hueter interval

Endpoint

- Correct Entry = Effortless access to the correct plane (TFL laterally, sartorius/rectus femoris medially) and rapid capsular exposure





Results

Key Outcomes

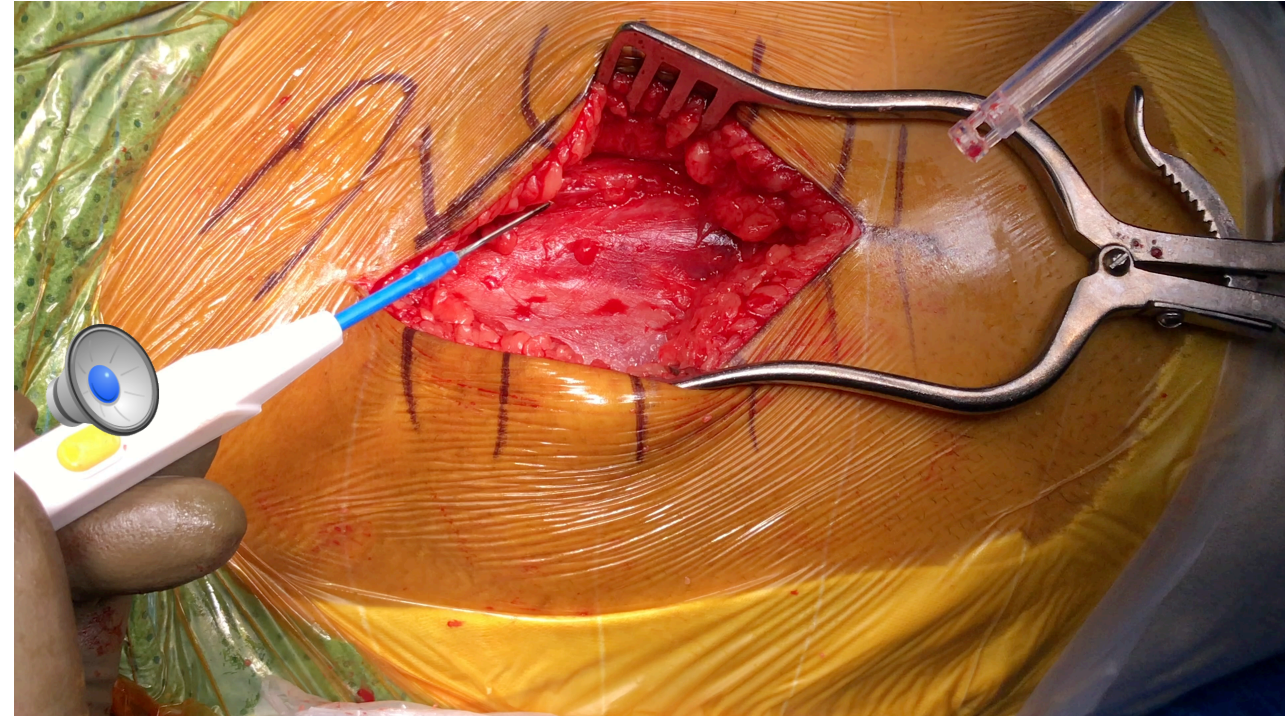
- TFL twitch sign observed in 100/100 cases (100%)
- Successful Hueter interval entry in every case
- Capsular exposure achieved within 5-7 minutes

Safety Profile

- No approach-related complications recorded

Reliability in Challenging Cases

- Sign remained reliable even when conventional visual landmarks were difficult to identify





Conclusion

Main Findings

- It is a constant, reproducible, and easily elicitable dynamic adjunct for identifying the Hueter interval

Clinical Significance

- Simple, objective, Reproducible, Immediate application.
- Intraoperative tactile cue that complements existing visual landmarks - valuable in challenging cases



Future Directions

- Larger prospective studies and multi-centre validation are warranted to confirm these promising preliminary findings.

Take-Home Message

- Apply monopolar cautery to deep fascia over the TFL belly ~5–8 cm distal to ASIS.
- A visible TFL twitch confirms correct location — enter the interval with confidence.
- Simple, Objective, 100% reproducible in 100 consecutive cases.



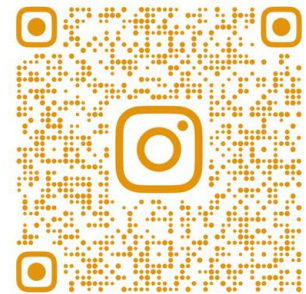
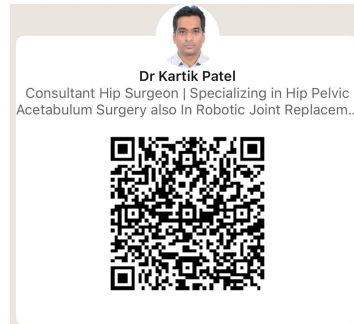
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