

**Supplementary text.** List of conditions that lead to exclusion of 8,182 operations based on the patients' medical history.

Records of hospitalization in the Hospital Discharge Register for the following conditions (identified based on International Classification of Diseases, 9<sup>th</sup> or 10<sup>th</sup> revision, diagnosis codes) between 1987 and the day of operation:

- inflammatory arthritis (M05.2, M05.3, M05.8, M05.9, M06.0, M07.1-M07.6, M08\*, M45\*,
- developmental hip dysplasia
- bone necrosis (M87\*
- secondary osteoarthritis (M16.4-M16.7, M16.9, M17.2-M17.7, M17.9, M91.1, M93.0,
- hip fracture (S72.0-S72.2, S32.4)
- congenital hip dysplasia/luxation (Q87.1, M16.2, M16.3)
- fracture around the knee (S72.4, S82.0, S82.1,
- purulent arthritis (M00.0-M00.2, M00.8,
- haemophilic arthropathy and related conditions (D66, D67, D68, M36.2)
- osteochondrodysplastic syndromes and congenital musculoskeletal deformities (Q77-Q79).

Reimbursement issued for the treatment of the following conditions, according to the Drug Reimbursement Register of the Social Insurance Institute of Finland, between 1964 and the day of operation:

- chronic systemic rheumatic diseases (corresponding ICD-10 diagnoses A04.6, A39.8, A50.5, D76.0, D76.3, H20.1, H30, I33.0, J84, K50.9, K51.9, K73.2, K74.3, K83.0, L40.5, M02, M05, M06, M08, M13.9, M30-M35, M45, M46.1, M46.9, M94.1, N03, and Q44.2)
- sequels of organ transplantation
- chronic uraemia