

Supplementary File 6: Tertiary chart of types of data with the summarized data of both journals' and books' articles

First author/ editor's name (date)	Type of article	DDH term replaces CDH	Developmental not congenital	Dysplasia means	Spectrum	Relation of femoral head to acetabulum	Forms of DDH	Typical DDH dislocation not teratogenic	Age of presentation	Untreated cases predispose to	Others
Aronsson <i>et al.</i> (1994) ^[24]	Journal/ multicenter study	DDH more accurate	Acronym CDH is confusing Developmental invokes the dimension of time before or after birth	Abnormality of development encompasses spectrum of hip problems	Encompasses the wide spectrum of hip problems		Unstable Malformed Subluxated Dislocated	Occurs in healthy infants In utero, at birth, or after birth	Seen in infants and children		
Mooney (1995) ^[25]	Journal/ review	Late diagnosis in patients previously normal clinically/ radiographically Spectrum of abnormalities			Encompasses spectrum of deformity and presentation		Dislocated Located but unstable or dislocatable Dysplastic	Neurologically normal infants			
Novacheck (1996) ^[26]	Journal/ review			Abnormal formation of hip joint between organogenesis and maturity as a result of instability	Spectrum in both time and severity			Does not include hip abnormalities caused by other diseases			Variable at presentation
Broughton (1997) ^[13]	Book/ chapter	Not all cases are present or detectable at birth, but some develop over the first few months of life			Spectrum of disorders		Dislocated unreducible Dislocated reducible Dislocatable Dysplastic		First few months of life		
American Academy of Pediatrics (2000) ^[27]	Journal/ guidelines	DDH is the preferred term	Many of these findings may not be present at birth			Femoral head has abnormal relationship to acetabulum	Dislocation Subluxation Instability Dysplasia Instability Dysplasia Subluxation Dislocation	Occurs in Healthy infant Pre- or postnatally			
Weinstein (2001) ^[18]	Book/ chapter		"Developmental" is more encompassing sense of organ growth and differentiation								

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Yamamoto (2005) ^[28]	Journal/ editorial	Teratologic dislocation must first be excluded Multigenetic diseases are not called congenital Its manifestation and progression are subject to perinatal environmental factors									
Storer (2006) ^[29]	Journal/ review	More accurately reflects the full spectrum of abnormalities		Abnormality in size, shape, orientation or organization of femoral head and/or acetabulum	Spectrum of abnormalities in immature hip		Dysplasia Subluxated Dislocated Unstable	Teratogenic hip dysplasia has fixed dislocation occurs prenatally in those with genetic or neuromuscular disorders		Premature degenerative changes and painful arthritis	
Benson (2010) ^[12]	Book/ chapter	Embraced the concepts of Instability and imperfect formation Not specifying when the displacement or dysplasia occurred								Inevitable progression to deformation, lost function and eventual osteoarthritis	
Ebnezar (2010) ^[15]	Book/ chapter					Partial or complete displacement femoral head from acetabulum	Dysplastic Subluxation Dislocation		Since birth		

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Noordin <i>et al.</i> (2010) ^[33]	Journal/ review	DDH describes the full range of abnormalities affecting the immature hip more accurately		Hip dysplasia is any abnormality in the shape, size, and orientation of the femoral head, acetabulum, or both			Unstable Subluxation Dislocation	Teratogenic Dislocation of hip has fixed dislocation at birth and associated with other severe malformation			Abnormalities arise as a result of maldevelopment of the acetabulum. The femoral head is involved secondarily During early growth and development
Nemeth (2012) ^[30]	Journal/ review	In recognition of this spectrum Child may have normal examination findings at birth but progress to dislocation later in life			Spectrum of hip abnormalities	Involving relationship between femoral head and acetabulum	Dislocated Dislocatable Subluxed Subluxable Dysplastic	DDH term does not apply to abnormal hip development due to other diseases	At birth		
Schwend <i>et al.</i> (2014) ^[19]	Book/ chapter				Spectrum of physical and imaging findings					Painful early onset degenerative arthritis	
Herring (2014) ^[21]	Book/ chapter	Include infants normal at birth but hip dysplasia or dislocation subsequently developed			Spectrum of disorders of hip development in different form at different ages			Teratogenic dislocation of hip occurs with other disorders			
Jackson <i>et al.</i> (2014) ^[31]	Journal/ review	It includes abnormalities other than overt dislocation			Abnormality of acetabulum or femoral head and their congruence		Hip dysplasia Terms used in DDH: Dislocation, dysplasia, equivocal examination, hip click, hip clunk, limited hip abduction, mild instability, and subluxation		At birth or in infancy		

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Weinstein <i>et al.</i> (2014) ^[2]	Book/ chapter						Subluxation Dislocation Dysplasia			Have different future problem: Low back pain, secondary scoliosis, gait disturbance, hip degenerative arthritis, knees deformities and degenerative changes	Most abnormalities are on the acetabular side. Femoral side changes are secondary Clinical definition Anatomic definition Radiographic definition	
Guarniero (2015) ^[35]	Journal/ review	DDH more precisely describes the spectrum of abnormalities possible for hip disorders among newborns		Dysplasia denotes abnormality of size, morphology, or anatomical orientation of femoral head and/or acetabulum DDH is inadequate development of the hip	Wide range of anatomical hip abnormalities Spectrum of abnormalities affects growing hip		Dysplasia Subluxation Luxation Unstable	Teratogenic dislocation occurs during first months of intrauterine life and associated with other disorders	Among newborns		Develop during children's first months of life	
Hefli (2015) ^[6]	Book chapter					CDH is displacement of femoral head from acetabulum						
Kotlarsky <i>et al.</i> (2015) ^[3]	Journal/ review	CDH did not describe the developmental aspect of the disorder		Range of abnormalities			Dislocation Subluxation Instability Dysplasia	DDH dislocation occurs in healthy infant pre- or postnatally				

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Wright (2016) ^[11]	Book/ chapter				Spectrum of disorders from dysplasia to frank dislocation with degrees of instability between them						
Loder <i>et al.</i> (2016) ^[17]	Book/ chapter	Most hips are not dislocated at birth			Spectrum of pathology			Teratogenic hip dislocation occurs early in fetal life and has fixed dislocation and associated with other diseases			
Kelly <i>et al.</i> (2017) ^[14]	Book/ chapter						Dysplasia Subluxation Dislocation				
Gargan <i>et al.</i> (2018) ^[10]	Book/ chapter	DDH reflect a spectrum of abnormalities in the development of the hip joint			Spectrum of abnormalities		Dysplastic Dislocatable Dislocated but reducible Dislocated and irreducible				
Shapiro (2019) ^[20]	Book/ chapter		Focuses on abnormalities in development	Dysplasia referred to delayed and imperfect development of acetabulum and the proximal femur	Spectrum of deformities	Structural relationship between proximal femur and acetabulum is abnormal	Subluxable or dislocatable Subluxated Dislocated Unstable	DDH is not associated with other diseases	Diagnosed at neonatal period		Dysplastic changes are either primary or secondary

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Vaquero-Picado <i>et al.</i> 2019 ^[34]	Journal/ review	CDH do not include the developmental aspect of the dysplasia			Spectrum of hip alterations		Instability Dysplasia Subluxation Dislocation			Leads to early osteoarthritis	
Yang <i>et al.</i> (2019) ^[32]	Journal/ review				Spectrum of abnormal hip development				During infancy		During infancy and early development

DDH: Developmental dysplasia of the hip, CDH: Congenital dysplasia of the hip