

Total hip replacement

Hip osteoarthritis overview

Osteoarthritis is a disease which affects the joints in the body. 'Osteo' means bone and 'arthritis' means inflammation of the joint which may lead to 'wear and tear'. This wear and tear can be painful and also make the joint difficult to move. It is quite normal to develop osteoarthritis as you get older but it affects some people more than others. The pictures opposite shows a healthy hip joint on the left and a hip joint with osteoarthritis on the right.

The hip is a large ball and socket joint that connects your leg to your pelvis. It must withstand extreme stresses, twists and turns, such as when we run or play sports. The end of each bone is covered with cartilage which has a very smooth, slippery surface. It is this cartilage that gets worn with osteoarthritis.

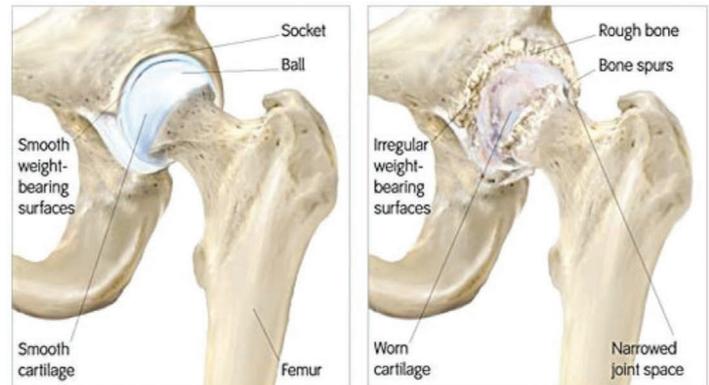
A diagnosis of hip osteoarthritis can be made following a thorough assessment by a qualified healthcare professional with the extent of the arthritis being confirmed by imaging procedures such as an x-ray.

Total hip replacement overview

A hip replacement will usually be recommended if one or both of your hip joints are damaged to such an extent that:

- you are experiencing persistent hip pain that is not responding to other treatments
- the range of movement in the joint is so restricted that day-to-day tasks such as walking are very difficult or, in some cases, impossible

A hip replacement is a common type of surgery where a damaged hip joint is replaced with an artificial one (known as a prosthesis). Other surgical procedures such as hip resurfacing maybe used as an alternative to a total hip replacement in specific situations, but these are not appropriate for most patients.



A hip replacement can be carried out under a general anaesthetic (where you are asleep during the procedure) or an epidural (where the lower body is numbed). The surgeon makes an incision into the hip, removes the damaged hip joint and then replaces it with an artificial joint that is a metal alloy or, in some cases, ceramic. The surgery usually takes around 60–90 minutes to complete.

What are the benefits of a total hip replacement?

There are several benefits of a total hip replacement, including:

- relieving pain
- improving the function of your hip
- improving your ability to move around
- improving your quality of life

What are the risks of a total hip replacement?

The most common complication of hip replacement is that something goes wrong with the joint which occurs in around 1 in 10 cases. Surgical complications can include:

- Loosening of the joint
- Hip dislocation
- Wear and tear of the prosthesis
- Excess bone forming around the artificial hip joint restricting its movement

- Numbness in the area around the incision scar
- Ligament, artery or nerve damage in the area around the hip
- Fracture in the bone around the artificial joint during or after surgery
- Blood clots
- Infection

It is estimated that around 1 in 10 people with an artificial hip will require revision surgery at a later date. All major surgery carries a small risk and 1 in 100 patients may have problems such that they are worse after surgery.

What to do before the operation

Stay as active as you can. Strengthening the muscles around your hip will aid your recovery. On the next page are some simple exercises to do that should help to strengthen your hip.

If you can, continue to take gentle exercise such as walking and cycling, in the weeks and months before your operation.

What to expect after the operation

On average you will spend 4 – 5 days in hospital following the surgery. The number of days can vary according to speed of recovery or any complications.

You will be expected to follow some specific exercises following the surgery to strengthen the muscles around the joint. Depending on your situation you may require an assessment from an occupational therapist to assess your functional capacity or may need to attend physiotherapy sessions.

For a short period of time following your surgery you will normally have to follow certain precautions. Your surgeon and rehabilitation team will talk to you about these in more details but often include the following:

- Do not bend your hip more than 90 degrees for 6 months
- Do not sit crossed legged
- Do not twist the affected hip

Other results to expect following surgery include:

- Some patients will feel hip stiffness or leg swelling for a few months
- Driving will not be possible for 6 weeks following surgery
- It is not possible to use a bath for at least 12 weeks after surgery. Adding a shower seat to your bathroom prior to surgery maybe advisable
- An artificial hip will NOT allow heavy work, lifting or repetitive impacts so you may need to consider changes to previous hobbies such as running or sports
- Place any useful objects at hand level so you do not have to bend down to pick them up
- Stocking up on food that is easy to prepare, such as frozen ready meals, or prepare and freeze your own dishes to reheat during your recovery
- Holiday flights after surgery should be avoided for a minimum of three months for short haul and six months for long haul flights
- You may require regular follow ups with x-rays after the operation

The following hip exercises may help improve your pain prior to your operation and maintain or improve the strength around your hip so that your recovery may be quicker after the operation. Do not perform these if they give you significant pain that does not settle for more than 30 minutes after the exercises. Also, these are not to be done after your operation until you have seen your consultant or a physiotherapist.

This is a general guide and individual surgeons may have different protocols. You should follow the advice of the surgeon who performs your operation with regards to post-operative exercise.

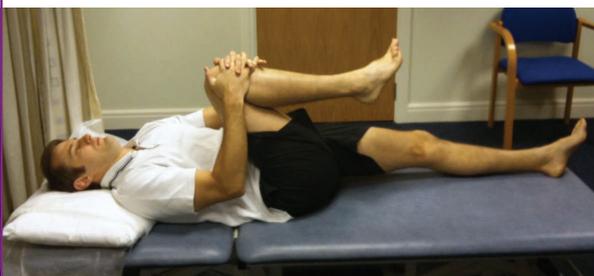
Exercises to strengthen hip muscles and improve joint movement before surgery

A Hip strengthening



- Lie on your right / left side.
- Gently tighten lower abdominal muscles then lift your bottom upwards ensuring you keep a neutral lower back position.
- Lift your top leg upwards approximately 50cm.
- Repeat this exercise until your muscles feel tired. Stop if your pain significantly increases.
- Perform exercise daily.

B Hip stretching



- Lie on your back.
- Pull your hip up towards your chest.
- Hold for 30 seconds.
- Exercise to be done twice a day.

C Lateral hip rotation



- Exercise to be done twice a day.

- Lie on your back and support your right / left knee with your hand.
- Use a towel to pull your foot inwards.
- Hold for 30 seconds.

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If you would like to talk to someone outside the service contact the **Patient Experience Team** on **0113 220 8585**, Monday to Friday 9.30am to 4.30pm or email lch.pet@nhs.net

We can make this information available in Braille, large print, audio or other languages on request.

Leeds Community Healthcare NHS Trust accept no responsibility for pain or injury resulting from the use of these information sheets. If you experience an increase in your pain that does not settle, or any other adverse symptoms, please contact your GP or physiotherapist before continuing with the exercises.