



Hip Replacement Surgery

Hip replacement surgery is a common type of surgery performed on a damaged hip joint, replacing it with an artificial one known as an implant. Adults of any age can be considered for a hip replacement, although it is most often performed on people between the ages of 60 and 80. The modern artificial hip joint can last for at least 15 years, with great success in reducing pain and improving movement and function.

Hip replacement surgery needs to be considered when the hip joint is worn or damaged such that your mobility is reduced and you are in constant pain, even while resting. The number one underlying reason for damage to the joint resulting in surgery is osteoarthritis. Other conditions that could result in joint replacement include rheumatoid arthritis, hip fracture, septic arthritis and disorders that cause unusual bone growth (bone dysplasia).

WHO IS CONSIDERED FOR HIP REPLACEMENT SURGERY?

This is a major procedure with its own



risks, and is therefore normally considered only after other treatments including physical therapy, exercise therapy, lifestyle changes, injections and medication are deemed to be ineffective in reducing pain or improving mobility.

Hip replacement surgery may be offered if:

- you have severe pain, swelling and stiffness and your mobility is reduced;
- your hip pain is so severe that it interferes with your quality of life and sleep;
- everyday tasks, such as shopping or

getting out of the bath, are difficult or impossible;

- you're feeling depressed because of the pain and lack of mobility, therefore the condition is impacting on your mental health; and
- you cannot work or have a social life.

Other considerations will include whether you are well enough to cope with both a major operation (other medical conditions or co-morbidities) and the rehabilitation afterwards.

WHAT HAPPENS DURING THE SURGERY?

A hip replacement is done under a general anaesthetic – where you are asleep during the operation. Sometimes an epidural (such as in child birth, which makes you numb from the waist down) is used to manage your pain following the surgery. The surgeon makes a cut (incision) into the hip, removes the damaged hip joint and replaces it with an artificial joint or implant. The procedure can take up to 2 hours to perform.

Different methods and tools are used depending on the surgeon and your condition. Hip resurfacing is an alternative option. This involves removing the damaged surfaces of the bones inside the hip joint and replacing them with a metal surface. This procedure removes less bone and is normally reserved for younger men who are still very active or people with large hips.

PREPARING FOR THE PROCEDURE

Understanding what is going to happen during and after the surgery is key to ensuring a good outcome. Education from your surgeon or physical therapist will help you to discuss your expectations for the future, prepare physically and emotionally and prepare your home for your return. You may require assistance dressing, making meals, or bathing during the initial weeks post-surgery – so planning this with family and friends will help. If you have a bedroom upstairs you may want to make a plan to have a bed moved to the ground floor for the first few weeks to reduce the challenge of stairs and risk of a fall in the early days of recovery. Should you need to run errands or go for check-ups and rehabilitation, someone else will have to drive for you initially.

Staying as active as you can and continuing with your strengthening exercises will speed up your recovery after surgery. If you can, continue to do gentle exercise, such as walking and swimming, in the weeks and months before your operation.

RECOVERING FROM HIP REPLACEMENT SURGERY

Recovery times vary from person to person.

Your hospital stay is usually 3–5 days, during which time a physical therapist will be getting you up regularly, teaching you how to use crutches or a frame and how to move around safely with your new hip and starting you on strengthening exercises again. You may also be enrolled in a group exercise programme that's designed to help you regain and then improve the use of your hip joint, which you will attend as an out-patient.

An occupational therapist may visit to check if you need any equipment to help you manage at home. For example, hand rails in bathrooms or a raised toilet seat or commode for night time.

It's usually possible to return to light activities or office-based work within around 6 weeks. However, everyone recovers differently and it's best to speak to your doctor or physiotherapist about when to return to normal activities.

RISKS WITH HIP REPLACEMENT SURGERY

There are risks associated with any major surgery. However, the risk of serious complications is low. Complications include:

- hip dislocation;
- infection at the site of the surgery;
- injuries to the blood vessels or nerves;
- DVT (deep vein thrombosis);
- a fracture in the bone around the hip replacement during or after the operation; and
- differences in leg length.

There's also the risk that an artificial hip joint can wear out earlier than expected or go wrong in some way. Some people may require revision surgery to repair or replace the joint.

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