

## **Total Hip Replacement**

A Total Hip Replacement is a surgical procedure that is utilized to replace the arthritic or injured hip. This joint is comprised of 2 major structures- the socket (acetabulum, a cup shaped bone in the pelvis) and the ball or head of the femur. During the surgical procedure, these 2 parts of the joint are removed and replaced with artificial surfaces. Several options are available for hip replacement and range from metal, ceramic, high density plastic or a combination. Fixation of the replacement is based upon patient age, demands and medical conditions. The surgeon will discuss these various options and utilize the most appropriate replacement.

### **When is a Total Hip Replacement Needed?**

Replacements are generally performed for severe arthritic conditions. The procedure is sometimes performed for other problems such as hip fractures or avascular necrosis. Most patients who have this procedure are 65 and older; however there are times when this is indicated for younger patients.

Most patients consider hip replacement for a variety of reasons: clinical evaluation and images that demonstrate advanced arthritis, significant stiffness or decrease in motion, when functional activities of daily life become impacted significantly and when medications such as anti-inflammatory or Tylenol no longer relieve the pain.

### **What to expect with a Total Hip Replacement?**

The replacement will provide patients with pain relief. It will allow patients to carry out normal activities of daily living. Motion and stiffness are improved after replacement. Recreational activities with lower demand can be enjoyed such as hiking, golfing, swimming, cross country skiing and biking.

### **What are some risks associated with Total Hip Replacement?**

As with all joint replacements' this is considered a major surgery. There are a variety of complications which can occur with replacement or afterwards. Often times prior to surgery the patient will have a medical work up completed to help avoid complications.

Surgical complications or risks include: blood clots in the leg(s), urinary infections, pneumonia, blood clots in the lung(s), wound infection, anesthesia issues, stiffness, leg length difference or dislocation of the replaced hip joint.

Some of these complications, such as infection or dislocation may require an additional surgery.

### What is the average stay in the hospital after replacement?

Most patients are in the hospital after replacement for 2-3 days. Patients who live with someone who can assist them after surgery generally transition to home without much problem. Often time's home health and home physical therapy is utilized for the initial weeks at home. If a patient lives alone it is encouraged that they find someone who can stay with them when they return home. If the patient is not safe to go home or is not progressing well a rehabilitation facility may be used for 1-2 weeks until they can care for themselves independently.

### How long will a walker or crutches need to be utilized?

Most patients use crutches or a walker for about 4 weeks or until instructed to otherwise by the surgeon.

### How successful is total hip replacement surgery?

Results are generally very good; most people are relieved of their hip and groin pain and the replaced joint will usually last ten or more years, depending on the patient use and activity levels.

The major long-term problem is loosening of the prosthesis. This occurs either because the artificial hip cement becomes loosened or because the bone melts away (reabsorbs) from the cement.

Loose, painful artificial hips can usually be replaced. However the results of a second operation are not as good as the first and the risks of complications are higher.