

Frequently Asked Questions

Hip Replacement

Q: What causes hip pain?

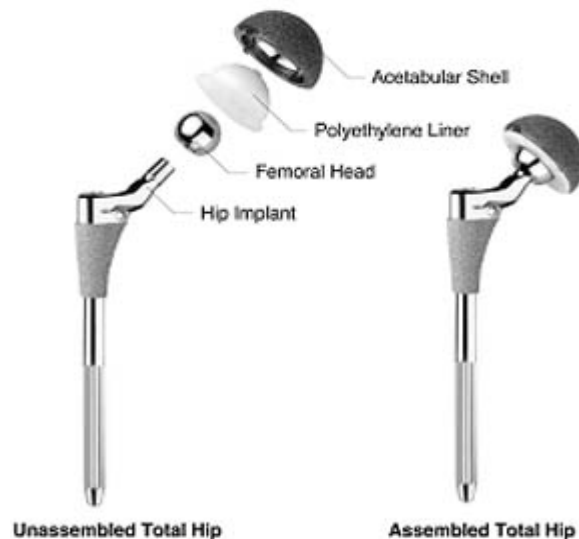
- [Osteoarthritis](#)
- [Fractures/dislocations](#)
- [Rheumatoid arthritis](#)
- Aseptic bone necrosis / [Avascular necrosis](#)

Q: Is there a cure?

A: Since hip pain results from damage to the joint, there is no "cure." However, there is a variety of treatment options available, ranging from rehabilitation to total hip replacement surgery.

Q: What is a hip replacement?

A: In a total hip replacement surgery, the painful parts of the damaged hip are replaced with artificial hip parts called a prosthesis, a device that substitutes or supplements a joint. The prosthesis consists of steel components: a socket, ball and stem. The outer shell of the socket is usually made of metal and the inner shell of plastic, or the entire socket may be plastic. When the metal ball is joined with the socket, the new hip can allow for smooth, nearly frictionless movement.



Q: How do I know if I need a hip replacement?

A: If you have difficulty walking or performing everyday activities such as getting dressed, it may be time to consider hip replacement surgery.

Doctors generally try to delay total hip replacement for as long as possible in favor of less invasive treatments. However, in patients with advanced joint disease, hip replacement offers the chance for relief from pain and a return to normal activities.

Q: How do I prepare for hip replacement surgery?

A: If you and your surgeon decide that total hip replacement is right for you, a date will be scheduled for your surgery. Several things may be necessary to prepare for surgery. For example, your surgeon might ask you to have a physical examination by your primary care physician. This will help to ensure that other health problems you may have, such as diabetes or high blood pressure, will be identified and treated before surgery.

You doctor may suggest that you lose weight and initiate an exercise program.

Be sure to tell you doctor if you smoke, as smoking can dangerously increase surgical risks and slow down the healing process.

You should also finish any dental work that may be underway, to prevent germs in your mouth from entering the bloodstream and infecting the joint. It is likely that you will need blood during hip surgery, and you may want to donate your own blood ahead of time.

Q: What happens during hip replacement surgery?

A: On the day of surgery, an intravenous tube will be inserted into your arm to administer necessary medications and fluids during surgery. You will then be taken to the operating room and given anesthesia.

The surgery usually takes two to four hours, although this is dependent upon the severity of the arthritis in your hip. In the operating room, a urinary catheter will be inserted and left in place for one or two days. Compression stockings and pneumatic sleeves will be put on both legs. The procedure is performed through an incision over the side of the hip. The ball-end of the thighbone (femur) is cut and replaced with the new metal ball and stem component. It may be stabilized with or without cement. The damaged surface of the socket is smoothed in preparation for the insertion of the new socket. The ball and socket are then joined. When the surgeon is satisfied with the fit and function, the incision will be cleaned and covered with dressings. You will also find small drainage tubes coming out of the hip to drain fluid from the wound.

You will be sent to the recovery room and as the anesthesia wears off you will slowly regain consciousness. A nurse will be with you, and may encourage you to cough or breathe deeply to help clear your lungs. You will also be given pain medication and will find a foam wedge or pillows placed between your legs to help hold your joint in place. When you are fully conscious, you will be taken back to your hospital room.

Q: How long does the surgery take? What is the recovery time?

A: In the weeks immediately following surgery, you may need walking aids such as a cane or crutches. Within a few months, however, you should be able to return to normal activities.

Q: How is the implant affixed in the body?

A: Generally, implant systems are affixed to the body in one of three ways:

- *Bone Cement:* A special type of bone acrylic cement may be used to secure some or all of the implant components to the bone. If used, the bone cement takes about 15 minute to set.
- *Press-Fit:* In other cases, the implants may be “press-fit” into the bone. Press-fit components may have a special porous coating that allows tissue to grow up to it for fixation.
- *Combination:* In some cases, your surgeon may choose a combination of cement and press-fit attachment, depending on the implant components and condition of the pelvic and thigh bone.

The decision as to whether to use a cemented or press-fit component depends upon many factors, including the manufacturer's intended use of the product, surgeon philosophy and the patient's condition.

Q: What can I expect after surgery?

A: When you are back in your hospital room, you will begin a gentle rehabilitation program to help strengthen the muscles around your new hip and regain your range of motion. On the day of surgery, you may be asked to sit on the edge of the bed and dangle your feet. You will also learn how to protect your new hip while doing daily activities.

As soon as possible, usually within the next 24 hours, your physical therapist will help you start walking a few steps at a time. As you heal, you will progress from walker to crutches and then a cane. Before you are dismissed from the hospital, an occupational therapist will show you how to perform daily tasks at home with your new hip, for example: how to go to the bathroom, how to dress yourself, how to sit or stand, how to pick up objects and many others.

After about two to four days, or when your surgeon determines that you have recovered sufficiently, you will be discharged. You may be transferred to a rehabilitation facility for a few more days, as determined by your surgeon. Upon returning to your home, you will need to continue taking your regular medications and continue exercising as directed by your surgeon or physical therapist. Walking, remaining active and practicing the required exercise are the quickest ways to full recovery.

Q: Will a hip implant last a lifetime?

A: How long a prosthetic hip lasts varies from patient to patient. It depends on many factors, such as a patient's physical condition and activity level, body weight and the surgical technique. A prosthetic joint is not as strong or durable as a natural, healthy joint, and there is no guarantee that a prosthetic joint will last the rest of a patient's life. All prosthetic hips may need to be revised (replaced) at some point.

Today, total hip replacement has become a common and predictable procedure. Many patients enjoy relief from pain and improved function, compared to their status before surgery. As a result, some patients may have unrealistic expectations about what the prosthetic hip can do and how much activity it can withstand. As with any mechanical joint, the ball and socket components move against each other. Natural fluid in the joint space, called synovial fluid, helps to lubricate the implants just as it lubricates the bones and cartilage in a natural joint. Still, the prosthetic components do wear as they roll and slide against each other during movement. As with car tires or brake pads, the rate of wear depends partly on how the hip joint is used. Activities that place a lot of stress on the joint implants, as may be the case with heavier and more active patients, may reduce the service life of the prosthesis. Implant loosening and wear on the plastic portions of the implant can lead to the necessity for revision surgery to replace the worn components, or all of the components. Your doctor will discuss these issues with you, taking into account your particular clinical circumstances, the type of implants used and your post-surgical lifestyle.

Q: What activities can I do or not do after hip replacement surgery?

A: Your doctor will advise you on safe activities for your particular condition. Talk with your doctor about the following points, and how they might affect the longevity and success of your hip replacement:

- Avoiding repetitive heavy lifting
- Avoiding excessive stair climbing
- Maintaining appropriate weight

- Staying healthy and active
- Thinking before you move
- Avoiding "impact loading" sports such as jogging, basketball, racquetball, gymnastics, downhill skiing and high impact aerobics. Safer activities include walking, golf, swimming, and bicycling.
- Consulting your surgeon before beginning any new sport or activity
- Avoiding any physical activities involving quick stop-start motion, twisting or impact stresses
- Avoiding excessive bending when weight bearing, like climbing steep stairs
- Not lifting or pushing heavy objects
- Not kneeling
- Avoiding low seating surfaces and chairs.

Q: Are there any complications?

A: Some common complications specific to hip replacement surgery include loosening or dislocation of the implant and a slight difference in leg length. Your healthcare team will discuss these possible complications with you and the precautions taken against them.

Q: How old is the average patient?

A: In the U.S., the average joint replacement patient is around 65-70 years old; however, patients of all ages have received hip implants.

Q: Will an implant set off a metal detector?

A: Patients have reported mixed experiences at airports: some detectors go off and some don't.

You will be provided with a special card to keep in your wallet explaining that you have a knee implant, but not all security screening personnel accept this as proof and you may encounter further questioning.

Q: What about sex?

A: Doctors generally encourage patients to resume sexual activities as soon as they feel able. In the months following surgery, patients are generally advised to take it easy and modify their positioning to keep pressure off of the joint while it's healing. As always, it is best to consult with your doctor about what's safe for your particular condition.

Q: How much does a hip implant cost? Is it covered by insurance?

A: The cost of a total hip implant varies, depending on the type of implant used. Typically, a total hip procedure includes four major implant components and the total implant price ranges from \$4000 to \$6000. Standard total hip replacement surgery is generally covered by most insurance plans. You will need to check with your particular health care plan for details.

Source: Zimmer, Inc.,

<http://www.zimmer.com/z/ctl/op/global/action/1/id/8140/template/PC/navid/68>