

GET BACK TO WHAT YOU LOVE



Find out why Total Hip Replacement may be right for you.





UNDERSTANDING TOTAL HIP REPLACEMENT

This brochure offers a brief overview of hip anatomy, arthritis and total hip arthroplasty. This information is for educational purposes only and is not intended to replace the expert guidance of your physician. Please direct any questions or concerns you may have to your surgeon.



Chronic hip problems can prevent you from enjoying everyday activities, but thanks to today's advanced technology, you no longer have to live with pain.

The first step to returning to an active lifestyle is to make an appointment with your orthopaedic surgeon. After a thorough examination, your surgeon will make a recommendation regarding surgery. Generally speaking, you are a candidate if you experience hip joint pain that is severe enough to prevent you from carrying out normal daily activities and if your pain is not responsive to non-surgical treatments. Total hip replacement surgery is the second step toward returning to a normally active, pain-free lifestyle.





HOW DOES YOUR HIP WORK?

The hip is a simple ball-and-socket joint where your thigh bone joins with your pelvis. Surrounded by cartilage, muscles and ligaments, your hip is the largest weight-bearing joint in your body. Smooth cartilage and bone help you walk easily and without pain.



The hip joint is powered by large muscles and is covered with a rubbery type of tissue that pads the joints. When all of the parts, cartilage, muscles and tendons are healthy, a hip should move easily.

A hip is diseased when one or more parts of the hip are damaged and movement becomes stiff. Over time, cartilage starts to crack or wear away. When this happens, the bones making up the joint rub together. Stiffness and pain occur when the ball starts to grind in the socket. Unfortunately, cartilage does not have the ability to repair or replace itself like other tissues in the body. Once cartilage is damaged or destroyed, it is gone forever.





There are many reasons why your hip may become diseased. Osteoarthritis, the most common form of arthritis, is a condition that causes "wear and tear" to your joint cartilage. It typically develops after years of constant motion and pressure in the joints. As the cartilage continues to wear away, the joint becomes increasingly painful and difficult to move.

Inflammatory arthritis is a chronic disease, such as rheumatoid arthritis or gout, which can cause swelling and heat inflammation in the joint lining, resulting in stiffness and pain.

Traumatic arthritis is inflammation of a joint resulting from an injury and is characterized by a breakdown of the bone and cartilage, bleeding in the joint space and increased thickness of the bone, a flattening of the joint surface, separation of joint cartilage from the underlying bone and/or erosion of the bone.

PREPARING FOR SURGERY

Prior to surgery, your surgeon will conduct a complete physical examination to determine the condition of your hip and your overall state of health. The examination may include x-rays and blood tests. Your surgeon will review your medical history and inquire about any medications you are currently taking. It's very important to inform the surgeon about all medications you are taking, including over-the-counter and herbal drugs.

Planning ahead can make the recovery process considerably easier. Here are some tips:

- Have someone help at home
- Consider an extended-care facility
- If your home has stairs, set up a temporary bedroom on the ground floor.





WHAT IS TOTAL HIP REPLACEMENT?

Today, more than 300,000 total hip replacement procedures are being performed every year in the U.S. alone.¹ Total hip replacement, also called total hip arthroplasty, involves removing the diseased bone and cartilage and replacing it with orthopaedic implants. Hip replacement may be recommended only after careful diagnosis of your joint problem.



More than 300,000 total hip replacement procedures are performed every year in the U.S.

You may benefit from surgery if:

- You have little relief from anti-inflammatory drugs,
- You have harmful or unpleasant side effects from your hip medications,
- Other treatments such as physical therapy do not relieve hip pain.

Total hip replacement is performed while you are under anesthesia. There are various types of anesthesia available, and your surgeon will explain the options before your surgery. The diseased parts of the hip joint are removed and replaced with implants.

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The surgical procedure involves the following steps:

- 1. An incision through the skin and access to the hip joint through the muscles overlying the hip while under anesthesia.
- 2. After the surgeon exposes the hip, your diseased hip ball (femoral head) is removed.
- It is replaced with an artificial ball on a stem that goes down into the hollow part of the thighbone and may be pressed into place or cemented using a special acrylic cement.
- The hip socket is prepared by machining it (reaming) using special instruments to make it the right size and shape. A metallic shell is pressed into place and sometimes further secured with bone screws.



Post op x-ray

- A cup-shaped liner is then placed in this shell forming the socket part of the ball-and-socket replacement.
- 6. The ball and socket are then placed together to complete the implant procedure.

The length of surgery may vary from approximately one to two hours. Care before surgery and time spent in the recovery room can add an additional one or two hours to the procedure.



WHAT CAN I **EXPECT AFTER SURGERY?**

After surgery, you will receive pain medication and begin physical therapy. It is important to start moving your new hip as soon as possible after surgery to promote blood flow, to regain motion and facilitate the recovery process. You may be out of bed and walking with crutches or a walker within 24 hours of your surgery.

You will be shown how to perform activities of daily living such as safely climbing and descending stairs, getting into and out of a seated position, and how to care for your hip once you return home. It is a good idea to enlist the support of family or friends to help you when you return home.

Most patients are ready to go home between two to five days after surgery; however, some people may go to a separate rehabilitation facility, which your surgeon should discuss with you before surgery.



You will be shown a variety of exercises designed to help you regain mobility and strength in your hip.

RECOVERY

Exercise is necessary for proper healing.

Therapy will begin in the hospital and continues either on your own or with a therapist after discharge for approximately six weeks.

Therapy, a healthy diet and willingness to follow all of your surgeon's recommendations will contribute to a more successful recovery after surgery. Most patients are able to walk without support and drive three to six weeks after surgery. Activities such as golf, doubles tennis and swimming can usually be resumed, but only with the approval of your surgeon. Recovery time will vary for each patient.

You will be given exercises to help with circulation, as well as strengthen muscles and improve joint motion. Your surgeon, physical therapist and every member of your healthcare team are there to support you, but your progress is up to you. Be sure to follow movement and any weight-bearing limitations. Also, do your prescribed exercises on your own so you can continue along the road to recovery.



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High-impact activities or contact sports are typically not recommended following surgery. These types of activities place an extreme amount of pressure on the joints, which could lead to complications. There are also certain precautions (avoiding certain positions and movements) of which you must be aware. Your surgeon will discuss these with you.

Your surgeon will schedule follow-up appointments shortly after your hip replacement and at regular intervals following your surgery to evaluate your progress. It is important to see your surgeon if you notice any unusual changes regarding your new joint.



WHAT ARE THE POSSIBLE **COMPLICATIONS OR RISKS?**

Joint replacement surgery is a major operation. As with any major operation, there are possible complications. Some of these are related to the anesthesia, while others are associated with the joint surgery itself. Every possible effort is made by the medical team to prevent complications, but this cannot be accomplished without your participation. Therefore, it is important that patients know about the following, which include but are not limited to: infection, blood clots, implant breakage, dislocation, malalignment and premature wear. Any of these can require additional surgery.

Although implant surgery is extremely successful in most cases, some patients still experience stiffness and pain. No implant will last forever, and factors such as a patient's post-surgery activities and weight can affect longevity. Your surgeon will discuss these and other risks with you.

There are many things that your surgeon will do to minimize the potential for complications. Your surgeon may have you see your family physician before surgery to obtain tests. You also may need to have any upcoming dental work completed or prepare your home to avoid any post-surgery falls.

WHEN TO CALL YOUR SURGEON

You should phone any time you have questions regarding your condition, care and activity level. Report any changes with your incision, such as an increase in swelling, redness or drainage that worsens during your recovery. Call your surgeon if you experience persistent pain not relieved by pain medication, have side effects from medication, or persistent swelling not relieved with ice or rest.



SUMMARY

This brochure is not intended to replace the experience and counsel of your orthopaedic surgeon. Surgery is one of the most important decisions you will make. Total hip replacement has allowed millions of people to return to more active lifestyles. Your surgeon will help you decide if it's the right choice for you.

With any surgery, there are potential risks, and results will vary depending on the patient. Joint replacement surgery is not for everyone. Check with your physician to determine if you are a candidate for joint replacement surgery. Your physician will consider the risks and benefits associated with this procedure, as well as individual factors such as the cause of your condition, age, height, weight and activity level.

REFERENCES

1. American Academy of Orthopaedic Surgeons http://www.aaos.org/

For more information

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