

How to Prevent Dislocation of the Operated Hip Joint?

- Do not cross legs
- Do not bend down to pick up things
- Do not sit on low chairs or sofas



Possible Complications

The rate of serious complications following hip replacement surgery is low. Common ones are:

- Deterioration of pre-existing diseases like cardiac disease, hypertension, stroke, diabetes mellitus, etc.
- Wound infection or poor wound healing
- Bleeding from the wound or haematoma formation
- Deep vein thrombosis, pulmonary embolism, fat embolism
- Dislocation of the replaced hip or infection
- Loosening of the prosthetic joint
- Nerve palsy
- Pressure sores due to prolonged bed rest

HKSH Orthopaedic & Sports Medicine Centre

Happy Valley

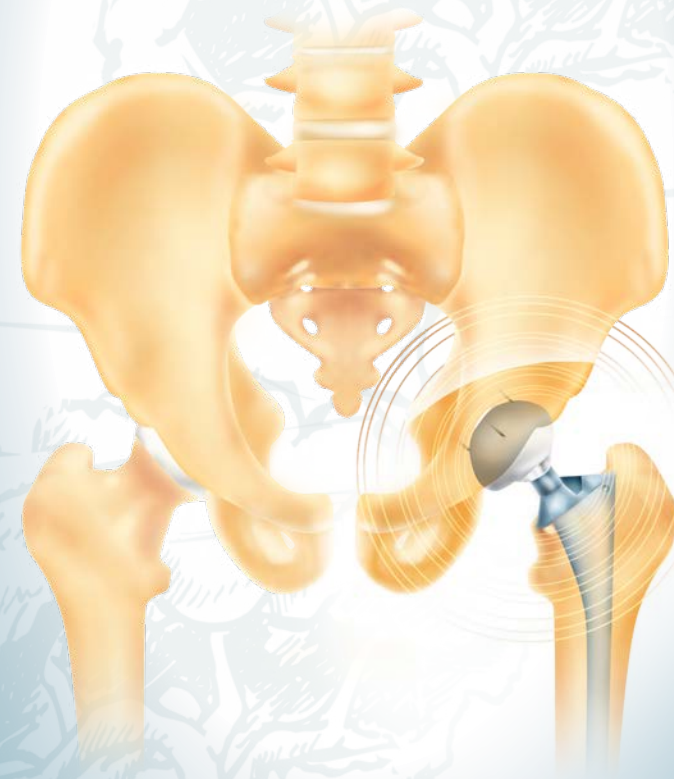
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Service Hours

Monday to Friday: 10:00 am – 6:00 pm
Saturday: 11:00 am – 3:00 pm
Closed on Sundays and Public Holidays
by Appointment



Total Hip Replacement

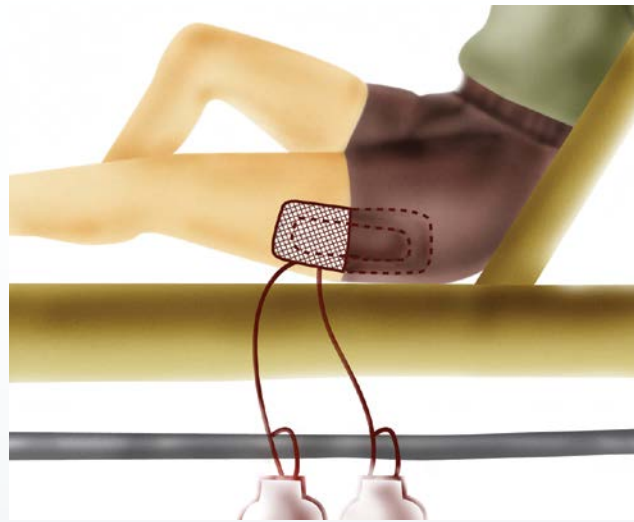


For enquiries and appointments,
please contact us

Total joint replacement is often regarded as one of the greatest inventions in the last century as it dramatically relieves the pain of patients suffering from arthritic joints, yielding a far better quality of life.

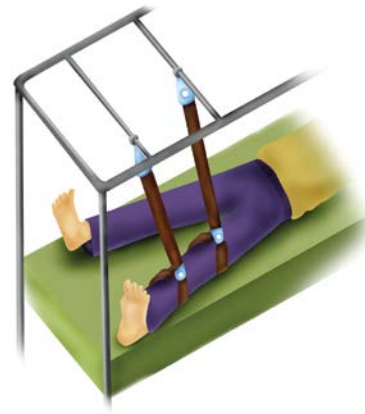
Total hip replacement is to replace the diseased hip joint with an artificial joint. If the hip has been damaged, normal activities such as walking or getting in and out of a chair may be painful and difficult. If the use of medications, changes in everyday activities, and the use of walking aids are not helpful, you may consider hip replacement surgery.

Total hip replacement can relieve pain and allow resumption of normal daily activities. The artificial joint usually lasts for about 10 to 15 years.



Common Indications for Total Hip Replacement

- Osteoarthritis of the hip
- Rheumatoid arthritis
- Avascular necrosis of the femoral head
- Fractured neck of femur
- Benign or malignant tumours affecting the hip joint
- Other hip joint damages caused by arthritic diseases



What Should I Do Prior to Surgery?

- Take blood test, hip and chest X-rays and electrocardiogram
- Physiotherapy including muscle training and breathing exercises
- No food or drink 6 hours before surgery
- Cleansing of the operating area
- If you have any medical condition like cardiac disease, hypertension, diabetes mellitus, anaemia or breathlessness, please consult your doctor for assessment and stabilize the condition before surgery
- Duration of surgery is about 3 to 4 hours



What Happens after Surgery?

- If your condition is stable, you are allowed to resume eating 4 to 6 hours after surgery. You will be given intravenous fluid supplement or blood transfusion if necessary
- You will be given oral, intramuscular, intravenous or other forms of analgesics to control pain
- An abduction pillow will be placed between legs to prevent dislocation of the replaced hip
- The drains inserted in the surgical wound will be removed 2 to 3 days after surgery
- A urinary catheter is usually inserted prior to surgery to facilitate urination after surgery. The catheter will be removed 2 to 3 days after surgery
- During the first 2 to 3 days after surgery, as recommended by the doctor, most patients can resume walking and sitting. It is recommended to sit on a high chair to avoid too much flexion of the operated hip joint, thus preventing possible dislocation. Patients are also advised to use a toilet commode to avoid too much flexion of the hip joint
- Deep breathing and exercises for the feet and ankles are helpful in preventing lung infection and deep vein thrombosis
- You can resume standing and walking under supervision of the physiotherapist
- You may need to stay in the hospital for one to two weeks after surgery. You are recommended to visit the hospital to continue training exercises

