

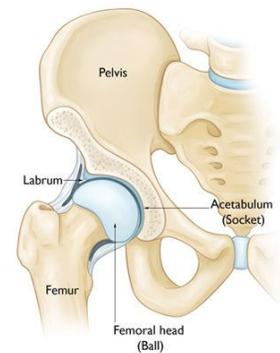
# Hip Joint Replacement

## Summary

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## Anatomy

The Hip joint is one of the largest joints in your body. It is a ball and socket joint. The joint is made up of the acetabulum and the head of the femur. The acetabulum, which is the socket portion of the joint, is part of your pelvis. The head of the femur, which is the ball portion of the joint, comes from your femur (thigh bone). The labrum is a fibrocartilaginous lining that increases the depth of the socket, helps provide cushion to the joint, and acts as a suction cup to keep the ball in the socket providing stability. Another part of the hip joint are ligaments, ligaments attach bone to bone to also help provide stability to the joint.



## PT can help

Physical therapy can be beneficial prior to getting surgery and may even prevent you from having surgery. PT can help increase ROM, increase strength, and decrease pain prior to having surgery. Individuals who perform PT prior to having surgery have been shown to have a quicker recovery following surgery. Their ROM and strength return faster and report improved function sooner than those who do not. Following surgery individuals are expected to get out of bed and walk 100 feet before leaving the hospital. Performing rehab prior to surgery can help individuals return to their homes sooner and eliminate the need for inpatient rehab.

## Surgery

The most common reason for getting a hip joint replacement is arthritis. Osteoarthritis is age-related wear and tear that occurs in the joint. The cartilage cushioning the bone wears away over time providing less shock absorption to it. This wearing can cause pain and stiffness in the joint. In a total hip replacement, the damaged bone and cartilage is removed and replaced with prosthetic components. Surgery is often recommended when individuals have pain that limits their daily activities, pain that continues with rest, stiffness that limits the ability to move the hip, and inadequate pain relief from anti-inflammatories and a course of physical therapy.

## Precautions

Following total hip joint replacement there may be precautions that have to be followed for a period of time to protect the joint and prevent dislocation. These precautions are based on the approach that the surgeon takes. Your surgeon and physical therapists will provide you with the precautions that you should follow.

## Exercises

There are several exercises that can help improve ROM and strength prior to surgery. The types of exercises that can be performed after surgery will depend on the approach your surgeon takes. A physical therapist can determine which exercises will be safe for you to perform. While your physical therapist can help individualize a program based on your needs some common exercises that are beneficial include:

- Mini squats: In standing with your feet shoulder width apart bend at your knees as if you are going to sit in a chair to 45 degrees keeping your trunk upright and then stand back up
- Glute bridges: Lay on your back with your feet flat and knees bent. Lift your hips up toward the ceiling and then lower back down.
- Standing marches: In standing while holding onto a chair for support lift one leg up toward your chest then the other.
- Standing hip abduction: In standing while holding onto a chair for support move your leg out to the side while keeping your trunk tall and hips level. Then lower back down.
- Standing hip extension: In standing holding onto a chair for support. Kick one leg backwards while keeping your trunk tall, then lower back down and perform on the other side.