



Hip Replacement Surgery

Pre-operative requirements

Hip replacement surgery is major surgery. It is therefore imperative that each patient is presented to the operating theatre in the best possible health so that any risk is minimised. Therefore, prior to the surgery date, blood tests will be required. These will be focused on baseline health status, including: blood count, nutritional status and diabetic control. Smoking needs to be ceased prior to surgery. A review by a specialist physician may be required to optimise the patient's health.

Pre-operative sessions with the physiotherapists and occupational therapists will be organised to educate each patient as to what to expect, teach them how to use crutches and educate and practice the exercises that will be required after the operation. By learning and practicing these activities before the operation, it allows the patient to focus on recovering from the surgery rather than having to learn new activities and skills. In the days leading up to the operation, special antiseptic bathing soaps will be used to reduce the risk of infection.

Post-operative course and rehabilitation

The rehabilitation process is broken into three time periods:

1. Early (1-2 weeks)

The goal of the early period is pain relief and mobility. This starts on the day of surgery, when the team will focus on getting the pain under control and getting the patient to stand and sit out of bed (if possible). The day after surgery, the physiotherapists will help mobilise the patient around the ward using the skills they learnt before the operation regarding using crutches or a walking frame. The exercises learnt before the operation will also be practiced, including reiteration of activities to avoid such as deep sitting and twisting.

Medications (antibiotics and blood thinners) will be administered to reduce the risk of serious medical complications.

The expected length of stay in hospital is 3 nights. Some patients are faster, while others require more time. Each journey is individualised. The requirements to get out of hospital are safely get in and out of bed, mobilise short distances to the bathroom and safely complete stairs.

Once discharged, the plan is for the patient to have a gentle 2 weeks at home mobilising short, but regular distances around the house. Each patient will need someone at home with them during this period and this may involve staying at a friend or relative's house. If there is any concern about the wound or problem with pain, Dr Roe's rooms should be contacted immediately.

2. Middle (week 2-12)

During this period the patient improves their mobility and continues their recovery from the operation. As hip replacement surgery is major surgery, every patient can expect to feel somewhat "washed out" for 8-12 weeks.



Dr Roe will see the patient with an X-ray at the 6 week mark and after that review the patient can usually return to driving.

The blood thinners started after the operation are ceased at 1 month post-op. At about this time, most patients are off crutches and may be using a walking stick (or often no aid at all).

As the weeks pass, the need for pain killing medication is significantly reduced with most patients having far less pain by 6 weeks than they had before their operation. The patient may still need intermittent paracetamol and anti-inflammatories at this time.

Patients with office based jobs are often back to work at the 6 weeks mark while more physical jobs will require a longer period off work or lighter duties.

3. Late (3-18 months)

Patients can expect to continue to improve with their pain and function for anywhere up to 18 months after the operation. Obviously, as the months go by the rate of improvement is slower. During this period, most people see a significant improvement in their quality of life and can often return to many of their usual social activities including bicycle riding, gym, golf, swimming and walking. Running is not encouraged.

In Australia the life expectancy for a hip replacement for osteoarthritis (including all age groups and implants used) is **92% at 15yrs** meaning that patients can expect longevity from their implants.