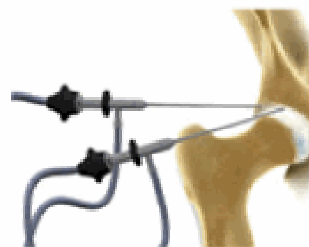


Orthopaedic and Sports Injuries Services "OASIS"

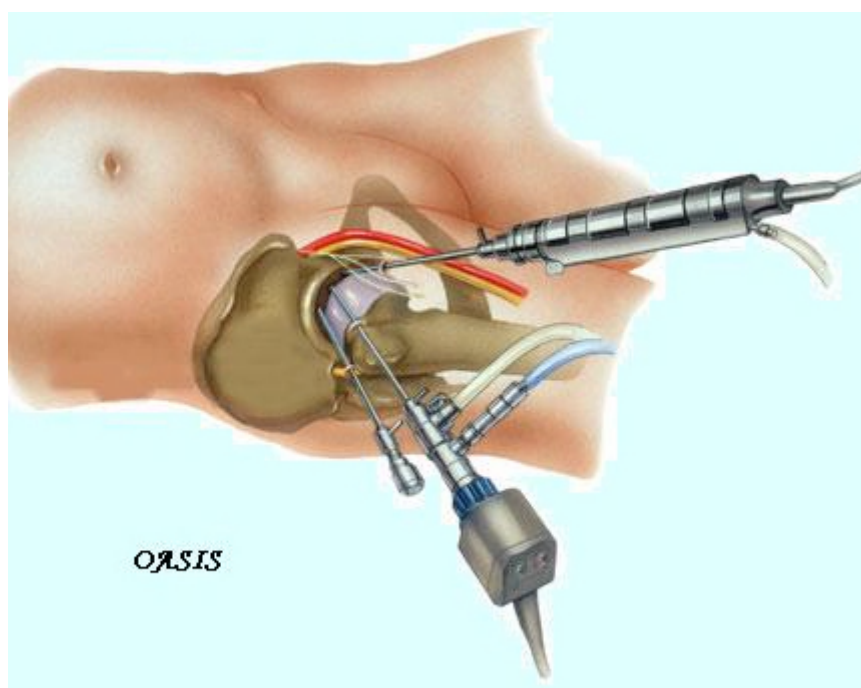
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Hip Arthroscopy – Patient Information



- Only recently have we been able to visualise the inside of the hip joint through an arthroscope. Specialised equipment has been introduced which creates space between the tight ball and socket of the joint and allows insertion of instruments between the surfaces of the joint. Many conditions in and around the hip joint can now be identified and treated.
- Hip arthroscopy is usually a daycase operation and requires a general anaesthetic. It takes approximately one hour to perform. Traction is applied to

the foot in order to distract the hip so that a space can be made between the joint surfaces for the arthroscope. Fluid is pumped through the hip joint to clear any debris. Surgical procedures using specialised instruments are then carried out. Hip arthroscopy is not only diagnostic but also is therapeutic in the treatment of the following conditions:

- **Investigation of hip pain**
Often patients with hip pain have MRI scans and X-rays which are reported as normal, It is not possible to say a hip is normal without looking inside the joint.
- **Loose bodies**
Loose bodies are small fragments of bone that 'float' inside the joint, sometimes causing painful spasms and locking of hip movement. They can be removed via the arthroscope.
- **Ligamentum teres tears**
The hip contains a large ligament that can be stretched or torn by injury. Surgery can tighten this ligament or remove it and prevent it from catching.
- **Cartilage (labral) tears**
In the hip, the labrum looks like a knee cartilage and can be damaged during sport, or as a result of arthritis, this can be repaired or the damaged area debrided and smoothed.
- **Joint surface damage**
Localised areas of joint surface cartilage damage can be repaired, microfractured or smoothed to encourage healing.
- **Synovitis**
The lining of the hip joint ('synovium') may become inflamed and may need to be removed.
- **Impingement**
Impingement of irregular bumps around the femoral head on the rim of the socket or of the femoral neck on the rim of a deep socket can lead to labral and joint surface cartilage damage. Removal of impinging bumps and rims can relieve these painful conditions.
- **Infection**
The hip joint can become infected. Hip arthroscopy is an excellent way of determining the infecting organism so that appropriate antibiotic treatment can be commenced, as well as cleaning out the infection itself.
- **Fractures**
Major injuries can sometimes cause the socket to fracture. This may result in bone fragments breaking loose within the hip joint. These are best removed, often using hip arthroscopy.
- **Arthritis**
(osteo- and rheumatoid) An arthritic joint can be washed out using the arthroscope. It does not always relieve pain, but is much less invasive than a major joint replacement.

- **Tumours**
Very rarely it is possible for tumours to grow inside a hip. They can be identified and often removed using the arthroscope.
- Hip arthroscopy is not widely available as it requires much specialist equipment and takes a long time to learn. Complications are few, occurring in less than 2% of patients, though it should be remembered that up to 5% of patients have symptomatic deterioration after the operation. It can also take three months to recover from surgery, with intensive physiotherapy required during this time.

Patient Complications

- No surgical procedure is risk-free. However, hip arthroscopy has a very low rate of complications. Approximately 2% of operations are associated with complications. Complications are of two sorts, those related to surgery generally (general complications) or those related to hip arthroscopy specifically (specific complications).
- **General complications** (common to most operations):
 - Anaesthetic complications (eg. chest infection)
 - Urinary complications (eg. inability to pass urine after surgery)
 - Gastrointestinal complications (eg. constipation)
 - Clotting complications (eg. blood clots in leg veins)
 - Cardiovascular complications (eg. heart attack, stroke)
- This list is by no means exhaustive, so if you have any queries, please ask your surgeon before hip arthroscopy is undertaken.
- **Specific complications** (related to hip arthroscopy specifically):
 - **Neurological complications**
Damage can occur to a variety of nerves that supply the leg. Mostly these will recover after the operation, but occasionally slight loss of feeling can remain over the upper and outer part of the thigh.
 - **Vascular complications**
These are complications associated with blood vessel damage. The arthroscopy wounds can sometimes after the procedure, though will always stop in the end. It is theoretically possible for large blood vessels to the leg to be damaged during hip arthroscopy.
 - **Infection**
This has been reported after arthroscopy in general. Should it occur this can be a major problem for the joint.

- **Instrument breakage**
Due to the technical demands of the procedure instruments have been known to break inside the hip. The broken pieces are retrieved.
- **Inability to distract the joint and visualise the hip surface.**
May occur in arthritic hips or very deeply embedded socket

Alternatives to Surgery

- Almost all of the hip conditions treatable are not life threatening - therefore it may be reasonable to accept some restriction in quality of life, use analgesics for symptomatic relief and avoid surgery.
- Simple lifestyle measures include weight loss, avoidance of provocation activities, with non-impact exercise to maintain joint flexibility and cartilage nutrition.
- It may also be helpful to have a trial of physiotherapy or alternatives, to try and improve symptoms. This may give temporary relief but will be unlikely to change the underlying pathological process.
- An injection into the hip joint may give temporary relief (steroid or synovial fluid analogue) but will not change the underlying pathological process
- Glucosamine may help early degenerate conditions
- Most of the treatable conditions will progress with time, it should be remembered that earlier surgical treatment is generally easier and more successful
- Open hip surgery is also possible and will deal with many of these problems and is a treatment alternative

If you are interested in making an appointment to discuss a treatment, please click here to [contact us](#), or telephone 01215807406

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