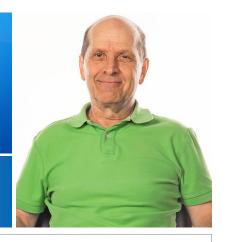
#### **HEALTH SHEET**

# **Total hip replacement**

**Preparing for surgery** 





You're about to undergo hip surgery. This fact sheet explains the operation and what you need to do to prepare for it.

## Why do I need this operation?

The hip is the joint between the leg bone (femur) and the pelvic bone. This operation is generally performed to correct bone wear (osteoarthritis). It relieves pain and allows the hip to move more easily.

#### What does it involve?

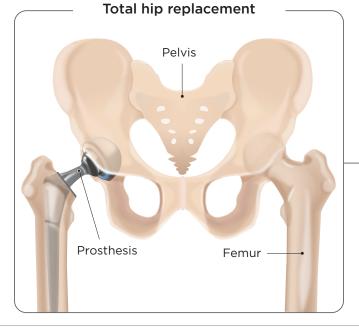
The joint is replaced by a prosthesis made of metal and plastic or alumina ceramic.

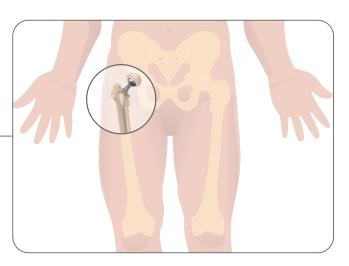
# Are there any possible complications?

The most common is the formation of a blood clot in a leg vein (thrombophlebitis). Such a clot could break loose and become lodged in the lungs (embolism). This situation must be treated urgently.

Other possible complications are:

- infection
- heavy bleeding
- blood accumulation in the tissues (hematoma)
- dislocation of the prosthesis (luxation)





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In the hours following the operation, you'll need to get out of bed and sit in the chair with assistance. This will help you avoid complications and recover more quickly. For more details, see the heatlh sheet <a href="Melever et bouger après mon opération">Melever et bouger après mon opération</a> [French only].

#### How long will I stay in hospital?

The operation itself takes about 2 hours. However, the entire process (preparation, operation, recovery, etc.) takes 4 to 5 hours.

# How should I prepare for the operation?

Here are the instructions to follow.

### EQUIPMENT

You'll need to get certain accessories before the operation. The mandatory and recommended items are listed in Appendix 1, page 4.

#### EXERCISES

Start doing the exercises presented in Appendix 3, page 9, now. These will help to:

- strengthen your muscles
- prepare your body for the operation so you can recover well afterwards

#### EATING AND DRINKING

Drink sweetened beverages from 6 p.m. the evening before until 2 hours before the operation. Drinks you can have: iced tea, fruit juices (apple and cranberry).

Stop eating solid foods from midnight the day before the operation.

#### MEDICATIONS

Certain medications should not be taken in the days leading up to the operation, such as:

- anticoagulants (blood thinners)
- anti-inflammatory drugs such as ibuprofen (e.g. Advil, Motrin)



The pre-operative clinic team tell you which medications to stop and when.

#### SMOKING

Smoking increases the risk of infection after surgery and, above all, delays healing. It is therefore strongly recommended to stop smoking at least **30 days before** the operation and for **2 months afterward**. For help, see the health sheet **Quitting smoking before** my operation.



#### SHAVING

The leg that will be operated on will be partly shaved for the operation. Don't shave it yourself, as this could increase the risk of infection.

# Are there any precautions to take **AFTER** the operation?

Yes. You'll need to avoid certain movements and positions. You'll find these contraindications in Appendix 2, page 6.

# What can I do to relieve pain **AFTER** the operation?

Don't let your pain go above a level of 4 out of 10 (10 being the worst pain imaginable). The stronger the pain, the more difficult it is to relieve.



If you're in pain, don't hesitate to ask for painkillers at the hospital.

### When can I resume my activities?

You'll need to wait a few weeks before returning to work, driving, or playing sports. Your doctor will have to authorize this at your follow-up appointment (6 to 8 weeks after the operation). Here's an overview of the wait times:

- Returning to work: 6 to 12 weeks (depending on the type of job you have).
- Driving: 4 to 6 weeks.
- Sport: at least 12 weeks.

# Who do I contact about my appointments?

To cancel or postpone the appointment for the operation, call the Appointment Centre during weekdays:

**514 890-8051** 

or

**1855 769-5842** (toll-free)



# Who can I contact if I have questions?

For any other question, contact the orthopedic follow-up nurse between 8 a.m. and 4 p.m., Monday to Friday.

**514 890-8000, ext. 26207** 

That nurse will contact you within 2 weeks after you receive the date of your operation.



#### USEFUL RESOURCES

You can watch the videos associated with this health sheet:

#### youtube.com

In the search bar, type "Prothèse hanche chum partie 1" [French only]

Other CHUM health fact sheets are available. Ask your care team which fact sheets can help you.



You can also read them online.

<u>chumontreal.qc.ca/fiches-sante</u>

6	Questions	

The content of this document in no way replaces the advice of your healthcare professional.



# **Total hip replacement**



#### APPENDIX 1: EQUIPMENT TO ACQUIRE BEFOREHAND

After your operation, certain accessories can help prevent complications and reduce pain. They'll also allow you to respect the restrictions on movements and positions. Here are the items you'll need.

#### MANDATORY: items you'll need to get before the operation



Cane



Walkers with wheels and skis
(Walkers are sometimes available on
loan from your CLSC. They are also
available in medical equipment stores
and some pharmacies).



Long-handled tongs



Raised toilet seat

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 Non-slip shoes or slippers with a maximum 2 cm heel and that cover the entire foot



 Longhandled shoehorn





Rollators should be avoided altogether.

## RECOMMENDED: these items are not mandatory but can help



• Sock threader



Non-slip bath mat



• Long-handled brush or sponge



#### **APPENDIX 2: RESTRICTIONS ON MOVEMENTS AND POSITIONS**

For 6 to 12 weeks after the operation, certain movements and positions are contraindicated. The following tables explain what you should and shouldn't do.

# Bending the hip

You must never bend your hip more than 90 degrees (right angle).



#### PROHIBITED



#### **MANDATORY**



You must not bend forward while seated. Instead, use the equipment indicated on page 15.



To stand up, you must extend the operated leg.



When you're seated, your knee should never be higher than your hip.



You must sit on a fairly high surface, that is, at least knee height.

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### Distance between knees

Don't put your knees together.



Don't cross your legs.



#### **MANDATORY**



Keep a distance of about 2 fists between your knees.





Sleep with a pillow between your legs, either on your back or on your side.

# Turning the hip

You must not turn the operated hip inward.



#### **PROHIBITED**



Don't turn toward the side of the prosthesis.



Don't change direction abruptly.



#### **MANDATORY**



When using the toilet, to wipe yourself, turn toward the side without the prosthesis.



Take small steps and turn your feet outward to change direction.



# **Total hip replacement**



**APPENDIX 3: EXERCISES** 

Start doing these exercises **now** to prepare your body properly. After the operation, the physiotherapist will put a checkmark next to the exercises you should continue doing.

#### **TIPS**

- Before the operation, do all the exercises.
- After the operation, do only the exercises checkmarked.
- For exercises involving only one leg, do them only with the operated leg.
- Do them every day. Your physiotherapist will tell you when to stop.
- After the operation, do the exercises when your pain medication is working best.
- Take breaks.
- You need to be able to see your operated leg. In hospital, you can do this by raising the head of the bed. At home, put several pillows under your head.maison,

### **Exercises in the reclined position**

Start them while lying on your back with your legs extended.

Do each exercise **3 to 4 times** a day. Repeat each exercise **10 times**.



## **Exercises for your circulation**



Pull the foot and toes toward you.



Push the foot and toes downward.

Last update: October

## **Buttocks squeeze**



Squeeze your buttocks for 5 seconds, then release.

## Thigh squeeze



Slowly squeeze the muscles at the front of the thigh. To do this, push the knee down as if to crush the mattress. At the same time, point your toes toward you. Don't squeeze your buttocks.

Hold for 5 seconds, then release.

# Strengthening the back of the thigh (heel push)



Push the heel downward, as if bending the knee.

You should feel the muscles behind your thigh working.



Hold for 5 seconds, then release.

# Triple flexion (knee flexion)



Slide your foot along the mattress without exceeding a right angle between your torso and thigh. Keep your knee in line with your heel and hip.

Return slowly to the starting position.



You can use a towel to help you if necessary.

# Hip abduction (opening the hip)



Gently spread your leg outward, sliding it on the bed.

It's important to point your toes at the ceiling and keep your leg straight.



You can put a plastic bag under your leg to make sliding easier.



Then return to your starting position.

# **Bridges**

#### OPTION A - BRIDGE



Bend both knees and lift the pelvis upward.



Hold for 5 seconds if possible, then release.

### OPTION B - MODIFIED BRIDGE



Place pillows or rolled-up towels under your knees.



Lift your pelvis as high as possible, squeezing your buttocks.

Hold for 5 seconds, then release.

#### **Knee extension**



Place a rolled-up towel or a pillow under your knees.

Lift your heel off the mattress, pulling your toes toward you. Lift the heel until the leg is straight. The knee should not come off the towel.



Hold for 5 seconds, then slowly lower it back down.

# Opening the knees



Bend both knees, keeping them apart, and bring your feet toward your buttocks.



Open your legs on both sides.

Hold for 5 seconds, then return to the starting position.

## **Standing exercises**

Your physiotherapist will tell you when to start these exercises.

Do them 3 to 4 times a day, for as long as your physiotherapist tells you to.

Repeat each exercise 10 times per session.

Start in a standing position, with your hands resting on a walker or the edge of a table. Make sure you have a chair, bed, or armchair behind you.







Bend your body forward and bend your knees slightly as if you were going to sit down.

Hold the position for 5 seconds, then straighten up while squeezing your buttocks.

## Hip flexion



Raise your knee toward your torso, but not beyond a 90-degree angle (right angle).

Return to the starting position.

# **Hip extension**



Slowly move the operated leg backward without bending the knee. Don't bend your torso.

Return to the starting position.

# Hip opening



Slowly move the operated leg outward without bending the knee. Don't bend your torso.

Return to the starting position.

### **Knee flexion**



Bend the knee of the operated leg, keeping your hip straight. Don't bend your torso.

Return to the starting position.