

Patient Information: Caring for your Hip after Arthroscopy

This information is a general overview only and does not replace specific medical advice about your condition and how best to care for it.

What is a “hip arthroscopy”?

Hip arthroscopy is a minimally invasive surgical procedure that uses a device called an arthroscope to diagnose and treat hip conditions. An arthroscope is a flexible tube with a camera that is connected to a video monitor. The monitor displays a magnified view of the hip joint tissue, allowing the surgeon to see any injuries, damage, or other abnormalities in the hip. Hip arthroscopy can be used to explore the cause of hip pain as well as to treat certain hip conditions at the same time.

The Procedure

During the arthroscopy, your leg will be placed in traction, which opens the ball and socket joint enough to insert the arthroscope. Your surgeon will make a small incision (about 1 cm) through your skin into the hip joint to allow the arthroscope to be inserted.

Once the arthroscope is in the hip joint, your surgeon will then be able to see the inside of the joint on a large screen and identify any problems. Fluid flows continually through the arthroscope to keep the image clear. When the problem or problems are identified, your surgeon can then insert tiny instruments through other small incisions. With these instruments, your surgeon may remove badly damaged tissue that won't heal and/or make repairs to other tissue.

The instruments and arthroscope are then removed, and the small incisions are closed with tape or sutures. A dressing is applied to the skin to protect the wound.

Pain Management

Local anaesthetic has been injected around the cuts and into the hip to minimise the discomfort after the procedure. This can last anywhere between 5 and 12 hours. When this wears off your hip may become more painful. Pain tablets work best when your pain is starting so it is best to take your pain tablets early rather than waiting for it to worsen.

Unless you have been advised something different, take paracetamol first. You will have been prescribed stronger pain tablets that you can also take if needed. If you have been prescribed Panadeine Forte, this also contains paracetamol so you cannot take this and medications containing paracetamol such as Panadol, Panamax or Panadol Osteo at the same time.

Your Hip Dressings

The cuts on your hip are closed with sutures and covered with waterproof adhesive dressings. These dressings are to remain intact until your follow up appointment. Your sutures will be removed at your 2 week follow up appointment. It is entirely safe to shower with these dressings, so long as the seal remains intact.

Swelling

It is normal for your hip to have some swelling after your surgery. To help manage this, try to ice your hip as much as possible for the first week. Keep ice applied for 20 minutes at a time with at least 20 minutes rest between icing. Ensure you have a barrier between your skin and the ice pack (tea towel or cloth) to avoid an ice burn.

Crutches

You may require crutches to help with pain or to follow post-operative weight bearing instructions.

Non weight bearing is no weight at all through your affected leg.

Partial weight bearing is usually $\frac{1}{2}$ (50%) of your body weight unless otherwise stated.

Full weight bearing is normal weight usually with or without crutches.

Weight bearing as tolerated is as much weight through your affected leg as tolerated, to your comfort.

Rehabilitation

Physiotherapy plays an important part in your rehabilitation.

At your 2 week follow up appointment you and your surgeon will discuss commencing formal physiotherapy.

Major therapy gains are not achieved during the first two weeks. This is mainly a recuperative period.