



Precautions following Total Hip Replacement Surgery

The purpose of this leaflet is to explain the hip precautions you will need to follow after your surgery. These precautions should be observed for a period of six weeks after your operation unless otherwise instructed.

Why are hip precautions necessary?

Following hip surgery the surrounding muscles and tissues need time to heal and it is important that you avoid certain movements after the operation to reduce the risk of dislocating the hip. The risk of dislocation decreases over time as the muscles tone up and the ligaments, which hold the hip joint together, heal naturally. This can take up to three months. To prevent your hip dislocating it is essential that you avoid the following movements for the first 6 weeks after your operation:

- Do not bend your hip more than 90
- Avoid bending down to the floor - use your dressing aids or ask for assistance
- Do not lift your knees higher than your hips
- Do not lean forward from the hips in seating
- Do not cross your legs, or ankles in lying, sitting or standing position
- Do not twist on your operated leg

How to sit down: walk to your chair, slowly turn around away from your operated hip. When you feel the back of your legs touching the chair, put your operated leg out in front of you and place your hands down onto the chair arms. Then, taking your weight through your arms and your un-operated leg, lower yourself down gently onto the chair. Once you are seated, you can bend your knee on your operated leg, so your foot rests on the floor.

Sit to standing: with your operated leg out, take your weight on your un-operated leg, push

up with your arms. Regain your balance, then retrieve your mobility aids.

Your bed: the correct height of your bed, whilst adhering to hip precautions, will be assessed by your Occupational Therapist prior to admission. If it is too low, your bed may need to be raised, alternately an extra mattress placed on top to raise the height, may be appropriate.

How to get in and out of bed: we recommend you to get into bed leading with your un-operated leg and get out of bed leading with your operated leg. When getting on/off the bed avoid twisting your hip. Keep your toes pointing to the ceiling as you move your operated leg across the bed.

Using the toilet: you may need to use a raised toilet seat or other toileting equipment whilst adhering to hip precautions. This will be discussed with you by your Occupational Therapist and issued prior to admission.

Sleeping: for the first 6 weeks after your operation you are advised to sleep on your back. (Please note: you do not need to lie flat, use plenty pillows) placing a pillow between your legs helps you to stay in this position and prevents rolling over. If you cannot sleep on your back ask your consultant for advice as to whether you may sleep on your side.

Dressing aids

Dressing aids are essential to reduce the risk of dislocation and to increase your independence in daily living activities whilst under hip precautions. Please bring these items in with you when you are admitted into hospital. We encourage you to wear day time clothing during your hospital admission to enhance your wellbeing. Wear suitable loose and comfortable



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clothing, that do not apply pressure to your hip wound. Ensure you have appropriate footwear which give support (full backed slippers, trainers, shoes with low heel), no backless slippers or flip flops.

Activities of daily living advice

Washing

After your operation you will be advised to strip wash initially. To reduce the risk of falls we advise you to sit in when washing, a high stool may be useful placed opposite your sink. Use a long handled sponge to wash your legs, do not attempt to wash and dry your lower body unless you use your dressing aids. If you have a walk in shower this can be used either standing or sitting on a high shower stool if this is suitable for your type of shower tray. You must not use your bath or transfer into a shower over the bath until you no longer require to adhere to hip precautions.

Dressing

Dress your upper body as usual. To dress your lower body start in a seated position. Use your helping hand (dressing aid) to avoid bending, Dress your operated leg first. To remove garments; undress your non operated leg first and a long handled shoe horn to apply/remove your footwear. Where possible wear slip on shoes with a low heel. If you wear shoes with fastenings you will need assistance to tie the laces or you may need to use elastic laces.

In the kitchen

We recommend that you cook on the top of your cooker, try to avoid using your oven, as this requires you to bend and lift hot items with two hands. You can also use your grill or microwave to cook meals. Consider using ready meals for simplicity in activity. Place frequently used items on your work surface to reduce the risk of over bending and reaching to reduce falls

risk in activity. Sit down in activity to conserve your energy, a high stool may be useful but avoid sitting sideways to the work surface and beware not to twist. Avoid carrying anything heavy or hot by sliding items along a work surface. You will require support from family/friends with shopping on discharge until you are fully mobile as you will not be able to carry and lift heavy bags. You may wish to consider online shopping.

Housework

For several weeks after your operation, you are likely to need help with activities such as house keeping, laundry and vacuuming. You can engage in light housework only for first 6 weeks – do not engage in activities which require bending or heavy lifting.

Picking things up from the floor

When picking up things from the floor always use a long reacher; alternatively, hold on to a firm support, put your operated leg out behind you and bend the knee of the un-operated leg.

Driving

Driving is not permitted for the first 6 weeks, for insurance purpose, regardless of whether you drive an automatic car. Travelling as a passenger is discouraged except for essential journeys. Follow the correct way to get in and out of a car.

Getting in and out of a car

- Park the car away from the kerb so that you are on the same level as the car before getting in.
- Position the seat as far back as possible and slightly reclined.
- Back up to the car until you feel the seat at the back of your knees.
- Put your left hand on top of the passenger



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seat and with the window fully down, grip the open door frame with your right hand, alternately use the dash board for support.

- Lower yourself down, keeping your operated leg out in front.
- Then lift yourself further in across the seat, towards the driver's seat - you may find a firm pillow helpful. Turn to face the right way slowly and carefully, sliding your operated leg into the foot well of the car. Lean back as you lift your operated leg over the car door frame.
- Remember to lean back so that your operated hip does not have to bend too far to get your feet in. A plastic bag on the seat will sometimes help you manage this more easily.

Reverse this procedure to get out again.

Work

You should be able to return to work between six and twelve weeks after the operation, however, this will depend upon your occupation. Please discuss this with your consultant for further advice

Sports and hobbies

Always discuss your desired activity with your Consultant, before engaging in activity. Short frequent walks are good exercise.

Flying

Flying too soon after your operation should be avoided owing to the increased risk of deep vein thrombosis (blood clot) and the difficulty in adhering to your precautions. If you are planning to travel abroad you should discuss this with your consultant.

If you have any further questions or concerns please do not hesitate to contact an Occupational Therapist at the hospital on:

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