

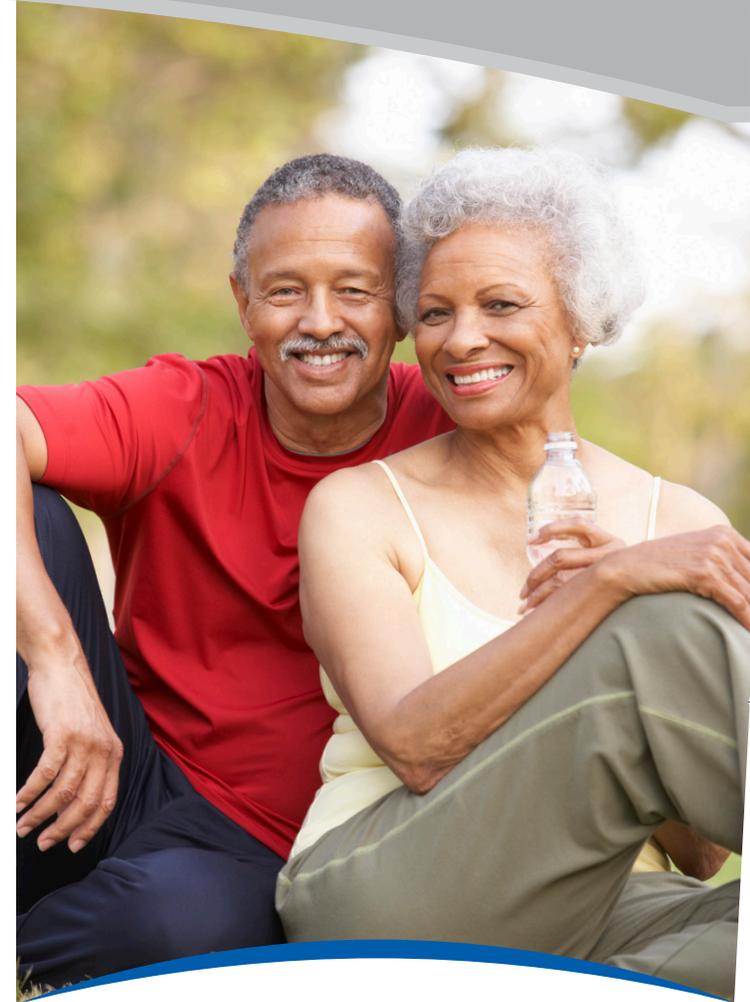
What is a Hip Resurfacing?

Hip resurfacing is a procedure similar to hip replacement in that the worn and painful surfaces of the hip are resurfaced with man-made components. The main difference is that with hip resurfacing, far less bone is removed than with a hip replacement. Rather than having the entire femoral head, or "ball" of the hip removed as with hip replacement, hip resurfacing involves reshaping the femoral head to receive a metal "cap." The socket side of the hip or acetabulum is relined very similarly to a hip replacement.

Hip resurfacing is most commonly recommended for younger patients with severe arthritis of the hip who may be faced with multiple surgeries over their lifetime.

How Long Will I be in the Hospital?

With improvements in surgical techniques and post-op care, it is now common for many patients to be able to go home from the hospital after two or three days. Of course, each patient is different, but the goal should be for you to recover in the comfort and privacy of your own home as soon as possible.



500 W. 4th Street • Odessa, Texas 79761
(432) 640-6000
www.mchodessa.com



How Long is the Recovery Period?

Once again, this can vary from person to person, but most people will need to use an ambulation aid such as a walker for 4 weeks or so. Driving may be possible in 2 to 3 weeks, and activities such as golf and bowling can be resumed in as few as 10 to 12 weeks. Activities such as singles tennis and skiing are not recommended. Most people will be able to go straight home from the hospital. Keep in mind that healing and recovery times can vary.

How Much Does it Hurt?

You will experience some discomfort after surgery, but be assured we will be doing everything we can to keep you as comfortable as possible. Pain is quite variable from person to person, and not entirely predictable, but modern medications and improved anesthetic techniques greatly enhance our ability to control pain and discomfort after surgery.

Will I Need a Blood Transfusion?

Your surgical team will be doing everything possible to minimize bleeding, but some blood loss after hip resurfacing is unavoidable. Whether or not a blood transfusion is required will depend greatly on highly individualized factors, including your condition prior to surgery, cardiac history, age, etc. Be sure to discuss these issues with your surgeon.

What are the Advantages?

There are a number of potential advantages to hip resurfacing. These include:

Bone preservation – with total hip replacement, the entire femoral head or “ball” is removed and a metal stem is inserted into the femoral canal. If the hip later needs to be revised, a longer and larger stem is needed, requiring additional bone removal and a more difficult operation. With hip resurfacing, the femoral neck and part of the femoral head is preserved, making revision surgery (if needed) much less difficult.

Less risk for dislocation – with hip resurfacing, the femoral head size is typically larger than with hip replacement, allowing for better range of motion and improved stability. This is important for younger, more active patients.

Low-wear bearing – the new generation of hip resurfacing implants feature metal-on-metal bearing surfaces. This configuration has been shown in the lab to result in very low rates of wear over time, compared to metal and plastic.

Who is a Candidate for Resurfacing?

The best candidates for hip resurfacing are typically younger patients (under 60 years of age) with isolated bone disease and who have strong bone around the hip joint. Those who are less likely to be candidates for the procedure include patients older than 60, as well as those with problems in the bone around the hip joint. This includes patients who have bone loss as

a result of their arthritis, patients with osteoporosis, and patients with cysts within the bone.

What are the Risks?

Hip resurfacing is a major surgery, and as with any surgery, there are complications you need to be aware of. These include:

- Blood clots in your leg veins
- Infection
- Implant loosening
- Fractures
- Nerve or blood vessel damage
- Hip dislocation

Another concern of hip resurfacing relates to the metal-on-metal bearing surfaces of the implants. All implants placed into the body wear out over time and while metal-on-metal components used in hip replacement and resurfacing have been shown to wear less than metal-on-plastic implants, they do release metal ions into the body. While these ions can be detected in people who have had metal-on-metal implants, there is little data to show that this is a problem.

Your surgeon and healthcare team will be taking great care to minimize the risk of these and other complications. Keep in mind that complications are relatively rare, but they need to be understood by you and your family. Your surgeon will be happy to answer any questions that you may have.