

Orthopaedic Connection

Not Ready For Total Hip Replacement?

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

As an Orthopaedic Surgeon I was trained at the Cleveland Clinic to consider other options besides surgery. While I have been gone from the Cleveland Clinic for some time the lessons they taught never leave. Operations come and go, but not well taught principles.

Apparently I am an exception to the saying "if you go to a surgeon he's bound to want to operate". Stated another way, if a surgeon has a hammer (surgery) everything looks like a nail.

I am very capable of doing all kinds of surgery. I also know my patients want to know what else is on the menu as I like to call it.

Correct Diagnosis First, Please

I have seen a tremendous number of patients who were sent to me with the diagnosis of arthritis of the hip. I often find after history, careful exam and plain x-rays that there is another cause of the pain. It's not from the hip at all! Now, there is a grateful patient!

Frequently though, it is arthritis and that takes us down a different road.

- Important point. I have to individualize treatment for each patient. If I believe that there is no alternative to surgery, I will discuss that with the patient and family.

Alternatives

- Physical Therapy
The goal is to strengthen muscles that support the hip and lower leg. Stretching is needed, but within limits. PT can improve strength and decrease pain.
- Exercise
Walk, water exercise, elliptical machines, ride a bike. Modify work activities at home (and at work if possible).
- Canes are our friend. It can really help you. Don't be too proud.

- Medication
Advil, Tylenol, Motrin, Naprosyn all can help. Even prescription medication.
- Less weight means less stress on the arthritic joint. It involves life changes that most people are unable to do, unfortunately.
- Viscosupplementation with Supartz, Euflexxa or similar Hyaluronic acid injection. Use in the hip is not approved yet. It has been done at times as an off label treatment. It might help.
- Glucosamine/Chondroitin. Maybe. It works better in the knee.
- Steroid (cortisone) injections. Hard to inject, but it might help for awhile (weeks to months).
- Stop smoking.
- Eat healthier, including Vitamin C and anti-oxidants.

As you have read there are many other "menu" items in addition to surgery. I have found my patients are most always interested in hearing what might be worth trying short of surgery.

Factoid

Oral hyaluronic acid pills are used to treat arthritis, but no studies have shown that they are effectively absorbed from the GI tract. There is no evidence that they are beneficial. Injection of hyaluronic acid (Supartz and others) into joints is helpful to most patients in my experience.

Office Website and Gratiot County Herald Archive

Please take the time to view the newly redesigned office website www.orthopodsurgeon.com and the amazing Archive of Articles (Orthopaedic Connection) in Gratiot County Herald. Every article title is listed from most recent back to the first. Click on any interesting title and the text of the entire article appears. The Archive and Website which takes you to Your Orthopaedic Connection is also a huge resource of Orthopaedic information. I deal with all of this in my practice and want the information to be available to all patients and families.

Our goal is simple - To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush