

# Lakeview Community Wellness Center Orthopaedic Connection

## Not Ready For Total Hip Replacement?

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### *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! The pain is actually coming from an inflamed bursa to the side of the hip. 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.

Please remember that anyone can make an appointment to see Dr. Haverbush at his office in Alma, at 315 Warwick Dr., across from Gratiot Medical Center. Call 989-463-6092 to make an appointment.

And don't forget every article I have written for Lakeview Area News is on my Website, [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com). Check it out. I specialize in you.

Be well.

Dr. Haverbush