

## LOTHIAN PHYSIOTHERAPY ORTHOPAEDIC GUIDELINES

# Total Hip Replacement

### **Introduction**

Surgery: total hip replacement, hip arthroplasty

Indications for surgery: pain, decreased mobility, decreased function

Expected Length of Stay: 2 days

### **Scope of Practice**

These guidelines are designed to guide the physiotherapist when treating patients following a total hip replacement. These guidelines were produced by a process systematic review of the current evidence based literature and medical and peer consultation. They were correct at the time of writing. The guideline should be used in conjunction with the clinical reasoning skills of the physiotherapist and patients should always be treated on a case-by-case basis.

### **Aim**

The aim of these guidelines is to provide physiotherapy staff with a series of recommendations from the current evidence base to assist them in the management of patients' following total hip replacement surgery.

### **Literature review question**

What is an appropriate rehabilitation program following a total hip replacement from day of surgery, through outpatient physiotherapy and return to function and sport in order to maximise outcome?

### **Search process**

The databases below were searched from January 2008 to January 2018. The titles and abstracts of all identified studies were assessed to determine whether they were pertinent to the research question. The search results were combined to ensure articles were not duplicated.

Total number of articles selected: 11

## Data bases:

	Dates	Limitations
Cochrane	2008-2020	English
Proquest via Athens	2008-2020	English
Pubmed	2008-2020	English

## Key words:

Total hip replacement	
Rehab	
Physiotherapy	
Hydrotherapy	
Post-operative rehabilitation	
Hip precautions	

## Results

Early mobilisation (day 0 or day 1), reduces overall length of stay and reduces post-op complications. It also increases patient satisfaction.

A physiotherapy led functional exercise programme can lead to patients having significant functional improvement following THR and therefore achieving optimal function.

In the immediate post-operative period patients that receive twice daily physiotherapy as opposed to once per day usually attain earlier achievement of functional milestones.

## Key Points

- **Please note that timescales are approximate and rehabilitation should be guided, at each stage, by minimal swelling, resolution of pain, good muscle recruitment and a good gait pattern.**
- Lack of good quality studies on rehabilitation following total hip replacement.
- Rates of recovery may vary for THR patients, particularly in the early post-operative period.
- Reduction of hip precautions- avoid combination of flexion, internal rotation and adduction with the posterior/ lateral approach.

## Recommendations

### Phase 1

Immediate post-op: 0-7 days

<b>Goals</b>	<b>Recommendations</b>
Achieve independent mobility with appropriate walking aids.	Ice therapy for swelling management as required
Independent all transfers	Lie supine for time period daily to aid swelling management and ROM.
Stairs assessment	
Home exercise programme consisting of bed, chair and standing	

### Phase 2

Early rehab:1-6 weeks

<b>Goals</b>	<b>Recommendations</b>
Increase mobility	Gait re-education
Increase independence	Functional rehabilitation
Increase joint ROM	Exercise Programme
Increase muscle strength	Decrease use of walking aids.

### Phase 3

Late rehab: 6-12weeks

<b>Goals</b>	<b>Recommendations</b>
Independent mobility without walking aids if appropriate.	Continue gait- re-ed as required
Gait	Sports/ activity specific rehab
Rom achieved	

Total Hip Replacement MSK Guidelines

Date: Nov 2020

Authors: Spire Hospitals (Contact Alison Bell), Reviewed by Gill Stewart & Claire Edmiston  
Orthopaedics, RIE

Return to exercise as appropriate with guidance	
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