



1818 E. 23rd Ave., Hutchinson, KS 67502
O: 620-259-2325 F: 620-682-8326



WHAT TO EXPECT AFTER SUPERPATH HIP REPLACEMENT

While the experiences of patients vary somewhat, there are a number of things that patients share in common after having a hip replacement via the SuperPATH approach. Please remember that there is someone available 24 hours a day to answer any questions you may have after surgery. Please call our office with any questions.

WALKING AIDES

You should use a walker, crutches, or a cane for at least 2 weeks after surgery. While some may feel that they can get away with not using any walking aides, those that push things too quickly find that they have increased pain after the first 2-4 weeks. This is usually in the groin or side of the hip. Some patients will need to use something to assist their walking for 6 weeks. The weaker you are before surgery, the longer you will need the help. Most patients stop using a cane by 2-4 weeks.

POSITION RESTRICTIONS

The SuperPATH technique makes it safe to place your hip in any normal position without dislocating the implant. However, you are still having a large operation and since your recovery will be faster than most, you may feel the urge to push the limits of what your new hip can do. Please note that the tendons and other soft tissues around your hip are stiff from not moving well for a number of years. Make sure that you focus on stretching out these tight tissues as instructed by your physical therapist so that you can enjoy your rapid recovery. The tightest tissues are in the groin and inner thighs.

ACTIVITY RESTRICTIONS

Recommended activities include: golf, walking, hiking, swimming, dancing, bowling, bicycling, elliptical machine, treadmill use, doubles tennis, rowing, stair-stepper, low-impact aerobics, weight machines, and cross country skiing.

Recommended for the more athletically inclined: downhill skiing, doubles racquetball, snowboarding, softball, ice skating or rollerblading, and martial arts.

Not Recommended: jogging, singles tennis, high impact aerobics, and contact sports (These are discouraged due to the higher risk of shortening the life of your implant).

Sexual activity after your SuperPATH hip replacement is only limited by comfort.

PHYSICAL THERAPY EXERCISES

Patients undergoing the SuperPATH hip replacement technique are sent to physical therapy after discharge for 6 visits. The exercises you will learn will make a big difference in avoiding the pain in the

groin and outside of the hip that some patients experience. It will also enable you to get back to normal hip function sooner. PLEASE NOTE! You will receive a booklet about your surgery when you schedule your case. There are some exercises in the book that you should NOT do. We will point these out to you.

WHAT TO EXPECT AFTER YOUR SUPERPATH HIP REPLACEMENT

INCISION

You have two incisions, a short one and longer one. They have been closed with absorbable sutures under the skin. You have a special dressing covering both incisions that helps to avoid infection. You should leave this dressing in place for at least 1 week, but some people leave it on until their first appointment. If it starts peeling off the skin early then you can remove it sooner. You are able to get the dressing and eventually the wound wet in the shower, but please do not soak it in a tub until after your first visit to see Dr. Loewen. If you feel you need a dressing on the wound after the first week, you may do so with gauze and tape, but you do not need anything if you are comfortable. You may have a slight red tinge to the skin around your incision that may make you concerned about infection, but this is more likely some deep bruising. If redness right next to the incision becomes more significant, please call. If you are on blood thinners (pills or injections), then some patients will have significant bruising around the incision and the buttock in general. Any drainage after the 6th day (day zero is your surgery day) is a major concern and needs to be seen by your doctor in case you are developing an infection.

PAIN

Patients typically have only mild to moderate pain with the SuperPATH technique. If your pain is not well controlled, please call right away so that we can help you. During your hospital stay and after your discharge you have been treated with what is known as multimodal pain control. This means that we address your pain in many different ways. Typically this includes Oxycodone (a short acting narcotic pain pill), Neurontin (gabapentin-a medication good for pain related to nerves which is taken at night since it makes most people sleepy), and Tylenol (non-narcotic pain pill taken on a scheduled basis every 6 hours). You should follow the instructions given to you at discharge from the hospital that are specific to your prescribed medications.

Most patients have pain around the incision area and the buttock. However, a few patients, and especially those that overdo it too soon, tend to get pain in the groin area and on the outside of the hip (the boney point you lie on when you are on your side). Physical therapy can be helpful with these specific pain patterns.

Ice can be very effective for pain control and the only limit to its use is to avoid frostbite.

DRIVING

You can drive when you are no longer on medication that makes you drowsy. This would include narcotics (Oxycodone) and Gabapentin (Neurontin). This is typically around the 2 week mark after surgery. Even if you do not feel drowsy, you should not drive when you are on the medicines. If your

surgery was on your right hip, then you should initially use the left foot to brake and then transition back to the right foot when you are comfortable.

LEG LENGTH DIFFERENCE

As your hip was wearing out, you were losing the thickness of cartilage in the joint. This shortened your leg over time. Some patients actually wear into the bone itself and shorten the leg even further. It is a rare patient that comes to surgery with the bad hip being the long leg. It is nearly always the case that the bad hip is the short leg. In surgery my goal is to make your legs exactly equal. The correction I make in your leg length happens immediately in surgery and your brain is used to the slow progression to the short leg with which you started. Therefore, you initially will feel like the side that I fixed is longer. Assuming you have no other sources for leg length differences, your legs should feel equal around 6 weeks after surgery as your brain gets used to the new signals from the muscles around your hip joint.

A FINAL WORD

Please remember that you are having major surgery. A hip replacement is a big deal and complications can occur. Your expectations about your recovery should be adjusted with these thoughts in mind. The patients that are the most disappointed are those that come in with unrealistic expectations about going about their normal life in a few days as opposed to a few weeks. If you overdo it shortly after surgery, you will feel more pain and you will slow down your recovery. The longer you have been disabled with arthritis, the longer it will take for you to recover normal function. Respect the fact that your body needs time to heal and you will be very pleased with the results of your hip replacement via the SuperPath approach.

Jonathan Loewen, M.D.