

HIP SURGERY : Initial post-operative rehabilitation

Name: _____ Date: _____

Procedure: _____

This handout describes details of the early post-operative care of your hip. The rehabilitation of your hip after surgery is essential for the success of your treatment. Your surgeon and physiotherapist will advise you on the specifics of your rehabilitation, but the ultimate responsibility to exercise consistently is yours.

The main goals of rehabilitation in the first two weeks are:

- Diminish pain and inflammation
- Allow the surgical wounds to heal properly
- Regain muscle control around the hip
- Commence appropriate exercises to avoid scarring and stiffness

Control of pain and inflammation

During the early post-op period, you will experience some discomfort in your hip. Generally this is "moderate" rather than severe and should be easily controlled with pain medications.

If you wish, you can use an ice pack wrapped in a damp towel, placed over the front of the hip for 15 minutes each hour or so to help with your discomfort.

Post-operative wound care

During your surgery, a large amount of saline is pumped through your hip. Some of this fluid remains and escapes as a blood-stained watery leakage from the wounds during the first 24-36 hours. This is normal. There are waterproof dressings on the wounds. These can remain undisturbed until clinic review. They may need to be changed the day after surgery due to the fluid leakage.

The plastic dressings are waterproof and may be gently showered over, then patted dry from 2 days after surgery. Avoid getting the wounds wet. Do not swim, have a spa or bath until you have been given clearance at your first clinic post-operative visit.

Out of town patients: Your first follow up will be a phone consult with our clinic nurse. Please attend your GP or GP nurse the day before this appointment to get the wounds checked and sutures trimmed / removed.

Your next clinic appointment is: _____

Contact the clinic if you have a significant amount of **ongoing oozing** or **bleeding** after the first 24h, or if you have **worsening swelling and pain** in spite of resting, taking your painkillers and decreasing exercise intensity.

Weight-bearing status:

- Full, with crutches Partial (10-15kg) Touch

If you are allowed full weight bearing, use the crutches until you can walk with a normal gait and no limp. This usually takes 5-10 days. If the hip becomes inflamed or sore, it is okay to go back to using the crutches for a few days.

Mobilization Exercises:

You can start your exercises within the first couple of days of your surgery. When doing exercises, perform all movements slowly and with good control and form. The exercises should not cause significant pain, but some post-exercise aching and fatigue is not unusual.

1. Exercycle

Start using the exercycle on the first day after surgery.

Sitting up, with the saddle high to avoid excessive hip bending. Low/no resistance, gentle cadence.

The aim is to get the hip moving, without overstraining the muscles.

Aim for up to 20 minutes twice a day. It is also the ideal warm-up prior to the other exercises.

2. Range of motion exercises:

Prone elbow

From lying flat, push up onto your elbows.

Hold for 30 sec, then relax down.

Repeat 3 times.



Prone knee bends:

Lying prone.

Flex your knee up to 90°

Hold for 5 seconds then relax down.

Repeat 10 times.



Assisted knee bends:

Lying on your back, use a strap to help slide your heel up the bed until your knee is flexed to 90° (shown).

Hold for 5 seconds, then slowly lower.

Repeat 10 times.



3. Muscle Control Exercises:

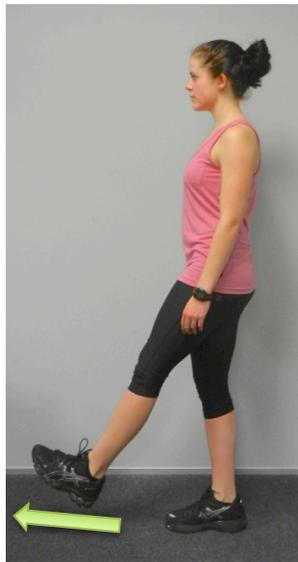
After surgery, there is often muscle inhibition and poor muscle control around the hip. The muscles “turn off” in response to the procedure. These exercises help you regain the active control of muscle function around the hip.

Standing hip movements:

Standing on your non-operated leg, move in a circular motion from adduction to flexion then abduction to extension then back to the starting position again. Keep your foot pointing forwards throughout the movement. Move it each direction as far as is comfortable **except extension**, which should be no further back than shown in the picture.



Across the body



Forwards



Outwards



Extension

Seated knee extension

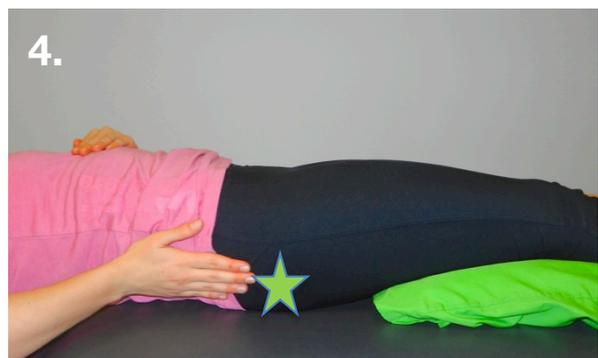
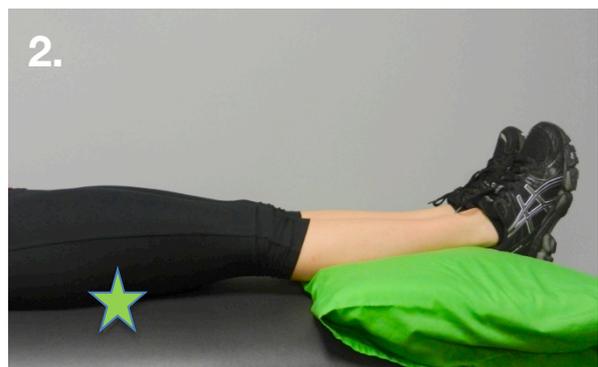
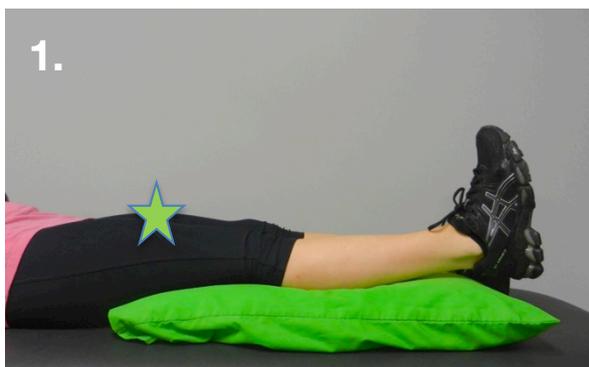
Start in a seated position.
Slowly straighten the operated leg as shown.
Hold for 5 seconds, then lower back to the starting position.
Do 3 sets of 10 repetitions



4. *Isometric exercises:*

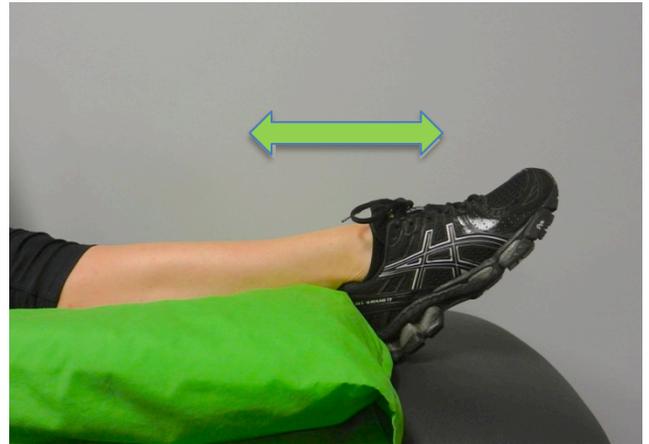
Isometrics are muscle contraction with movement. This involves tightening the muscle group and holding it tight, then relaxing. It retrains muscle control without putting too much stress on the joint. These exercises are done lying on your back, using a pillow as shown in the photos. With each muscle group, tighten, hold for 5 seconds and then release. Repeat 20 times.

1. **Quads:** Straighten the knee completely by tightening quads (front thigh muscles)
 2. **Hamstrings:** Move pillow behind heel, push you straight leg onto the pillow
 3. **Adductors:** Place pillow between your knees. Squeeze your knees together. With your hips and knees bent, place a towel or ball between your knees. Squeeze and hold for 5 seconds, then relax. At the same time as squeezing, contract your abdominal muscles as described below (5).
 4. **Gluteals:** Squeeze your buttocks together to lift your pelvis up.
 5. **Transverse abdominals:** Lying on your back, draw your belly button towards you spine, while keeping your pelvis and spine still. Hold for 5 normal breaths. Start with knees and hips flexed, then progress to legs straight.
- This abdominal control should be used while doing all of the core stabilization exercises.
6. **Abductors:** Lying on your back with knees and hips flexed. Place a belt or strap around your knees. Push out against the belt, hold for 5 seconds, then relax



5. Ankle Pumps

These can be done either sitting or lying down.
Point the foot down fully, then bend it upwards
towards your head fully.
Do 3 sets of 10 repetitions.
Repeat at least 5 times per day.



6. Prone terminal knee extension

Lying face down, with a foam roller or firm bolster under your feet.

Tighten the quads and butt muscles to bring your knee fully straight, this will lift your pelvis up off the floor slightly.

Hold this position for 5 seconds, then relax. Aim for 10-15 repetitions.

