STEPPING OUT

on a new resurfaced hip

by Dee Grider, Assistant Editor of Faith & Family Matters

Do you recall the elation you felt when you discovered the solution to that problem that had been plaguing you for a long time? Maybe it was as simple as fixing that annoying squeaky door. Or, maybe you helped solve the crisis at work that was looming over everyone's heads. When I discovered hip resurfacing (HR), a bone-conserving alternative to total hip replacement (THR), I felt both relieved and excited to find a sensible answer to my hip pain. In May 2012, at the age of 50, I became a "Surface Hippy," the term donned by a community of patients who have undergone HR surgery to eliminate the pain and immobility of an arthritic hip.

My Story - Over the last 5 years. I endured random buckling of the hip and increasing pain while walking any distance or standing. Like many people, I thought it was just a sign of getting older. During this time I tried exercises, icing, activity avoidance, various anti-inflammatory medications and eventually mild narcotics, but my hip misery continued along with loss of range of motion (ROM). After years of searching for answers with various specialists, I was eventually diagnosed with a large labral tear and associated cysts from osteoarthritis (OA). Unfortunately, the arthroscopic experts said my hip was too far gone to repair the damage, yet I got conflicting advice about needing a new hip from orthopedic doctors. One surgeon suggested I consider a THR. "I'm too young!" I thought and the vision of cutting off the upper part of my femur was frightening to say the least. Thankfully, I discovered HR and the advantages of this lesser known surgery. (See side bar of advantages.)

While traditional total hip replacement has long been considered the most successful orthopedic surgical procedure to relieve chronic pain, many arthritis sufferers are just not informed that hip resurfacing is a viable alternative for active and younger patients.

I was keyed into the HR alternative by Gwen, one of the expert physical therapists at Nesin Therapy, where I received tremendous care both pre-op and post-op. Word-of-mouth continues to be a major resource for HR information and referrals, because HR surgery is not as widely available as THR. Patient-to-patient websites (see sidebar) have a major role in educating the public by offering vast amounts of HR facts, statistics, testimonials and support.

To determine if HR is appropriate, a patient should consult with an HR surgeon. Because the surgery is difficult with a long learning curve, experience and expertise are crucial qualifiers when choosing an HR surgeon. According to his website, Mr. Derek McMinn of Great Britain, pioneer of the Birmingham Hip Resurfacing says, "An experienced surgeon and a well-proven device are the key to success with a resurfacing."

For my surgeon, I selected Dr. Thomas Gross of the South Carolina Joint Replacement Center, who has performed more than 3,000 HR surgeries to date. When reading my x-ray, his expert eyes recognized that along with OA, I have mild dysplasia (a shallow socket) and concluded this condition was a contributing factor to the abnormal wear and tear on my diseased hip. Once again I felt relief from getting the whole answer to my problem. With excellent pre-op and post-op long distance care from my surgeon's office, my recovery process has been remarkable.





HIP RESURFACING

TOTAL HIP REPLACEMENT

In HR, the small affected amount of the femoral head (ball) is removed and a hollow Cobalt-Chrome cap with a small stem is applied over the femoral head (slightly similar to a crown applied over a tooth). A metal cup replaces the acetabulum (socket) in the pelvis. In THR, the femoral head and top portion of the femur bone is removed. The remaining bone is drilled and a long-stemmed device is inserted into the femoral canal and marrow.

Advantages of HR over THR include:

- Bone-conservation, femoral head is preserved and not removed
- · Greater range of motion
- Metal-on-metal (MOM) implant has long expected life with low wear rate
- · Decreased risk of dislocation due to larger size implant "ball"
- · Easy to revise an HR to a THR if needed
- Ability to return to high-level activities for most patients (tennis, Ironman, yoga, skiing, marathon running, kickboxing, etc.)

Disadvantages:

Risk for femoral neck fracture (since it is not removed)

Websites to start your research:

www.surfacehippy.info www.hipresurfacingsite.com www.grossortho.com www.mcminncentre.co.uk

x-ray images provided by www.hipresurfacingsite.com

Why choose HR? On his website Dr. Gross explains, "...hip resurfacing is the operation that alters the natural joint the least; it preserves the most native material and leaves the biomechanics of the hip the most normal." Research indicates there is a very low incidence of complications and adverse reactions in modern HR surgeries. If you are considering treatment options for your hip arthritis please research the choices and consult



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