Physiotherapy

Patient Information

Advice and exercises following a total hip replacement

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

Document history

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Innovation and excellence in health and care
Addenbrooke's Hospital I Rosie Hospital
Some useful post operative advice:

You have now undergone an operation to remove the worn sections of your hip joint, replacing them with new metal and plastic parts. The advice that is provided for you within this booklet will help you to make a speedy recovery, along with directions provided to you directly by your physiotherapy team and surgeon.

Precautions:

Due to the type of operation that you have had, it is important to remember there are certain things that you can and cannot do. Below is a reminder of the dos and don’ts, to help to protect and prolong the life of your new hip.

- Don’t cross your legs, knees or ankles
- Don’t sit on armless chairs, you will need chair arms to help you push into a standing position. When sitting your knee should be slightly lower than your hip.
- Don’t twist on the operated leg
- Don’t jump, even low distances
- Don’t lift heavy objects

- Do the exercises you have been, and will be taught
- Do increase your walking distance gently
- Do make sure you have somewhere to rest if you get tired when walking
- Do watch your weight
- Do lie flat for half an hour twice a day to stretch the hip and restore good posture

Page 1
**Pain Relief**

To help with your treatment, it is important that you have adequate pain relief. If you are suffering high levels of pain, following discharge from hospital, please seek advice from your GP.

**Anti-embolic stockings**

During your stay in hospital you will be wearing anti-embolic stockings. These should be worn all the time for the first four weeks after your operation or until you are back to your normal level of mobility. They should be removed daily to wash and dry your feet. At the same time you should check that the skin is in good condition. If the skin is red or sore please contact your practise nurse.

You may need someone to help you to get your stockings on and off. Make sure they are no folds or wrinkles in the stockings when in place.

**Contacts**

If you have any concerns following discharge from hospital, the inpatient physiotherapy team can be contacted on 01223 216104.

**Information**

Please be aware that this leaflet is to be used as a guide. If you find these exercises painful please seek advice from your physiotherapist or doctor.

**Sleeping**

Try to lie flat in bed. However, you may lie on your operated side three weeks after the operation (when the wound is fully healed), with two pillows between your knees.

**Sitting**

Avoid sitting on low chairs or beds. Remember to keep the angle between your body and your operated leg at more than 90°. There are specially designed blocks available to raise beds and chairs. **Do not put your operated leg up on a footstool.**

**Walking**

As you become steadier on your feet you can slowly increase the distance you walk. As you progress you may try general household activities however try to avoid prolonged standing. If you wish to resume a particular hobby please discuss this with your surgeon or physiotherapist.

**Post operation**

The following information will help you during the first three months following your total hip replacement.

You may experience some initial pain and discomfort from your new hip, this should settle within a few days with the help of pain relieving medication. The stiffness and soreness may last a few months until the muscles and structures around the hip have fully healed and strengthened.

You will be seen by a physiotherapist within 24 hours of your operation. He / She will encourage you to start exercising your new hip. You will be assisted out of bed, encouraged to walk with aids and sit out in a chair by your bed.

It is important to practise your exercises regularly. The physiotherapist will encourage and help you to become fully independent around the ward and teach you to negotiate stairs.
You will also be seen by an occupational therapist who will advise you on any aids you may require to help you with independence in the home. Expect to stay in hospital between two and seven days.

Healing
It usually takes:

- two weeks for the skin to heal
- six weeks for the ligaments and capsule to heal
- a further six weeks for them to strengthen
- up to six months for the bone to fully heal and strengthen

Your progress:
Everybody recovers at differing speeds and this will depend upon your age, your general health and the nature of your surgery. It is important to understand that your recovery in hospital requires your help as much as that of the hospital staff.

How to come down stairs:
- Hold the hand rail
- Step down with the weaker leg and the walking aid.
- Bring the strong leg down one step to join the weak leg.
- Repeat the above until the bottom of the stairs is reached.

Driving
You may travel as a passenger in a car the day after your operation. You should not drive for at least six weeks or at your surgeon's discretion. If you are a passenger, break up long journeys hourly. When you are fit enough to drive again don't forget to tell your insurance company you have an artificial hip. It is important that you do not drive until you feel fully in control of the car in an emergency situation.

To get into the car:
- Slide the seat back on its runners to give maximum leg room.
- Sit onto the side of the seat.
- Slide your bottom back towards the centre of the car.
- Lift your legs into the foot well one at a time. Re-adjust the seat for comfort.

To get out of the car:
- Slide the seat back.
- Turn towards the outside, lift each leg out into the gutter, one at a time.
- Stand up.

You will be referred to your local physiotherapy service on discharge. They will progress your exercises as and when appropriate.
Use of Ice
Ice can be used after your surgery to reduce pain and swelling. Either using an ice pack (or if not available place ice cubes in a plastic bag), wrap this bag in a tea towel to prevent the ice having direct contact with the skin. Apply to the hip for 20 minutes.

Negotiating stairs
The golden rules for walking up or down stairs are one step at a time and hold the rail. If you are going up, step up with your un-operated leg first. To go down, move your crutches first, followed by your operated leg and then the un-operated leg.

How to go up stairs
- Hold the hand rail.
- Place your walking aid or aids in the other hand.
- Step up with the strongest leg first
- Then bring the weaker leg and the Walking aid up to the same step that the stronger leg is standing on. Keep repeating the above for each step.

Breathing exercises
These will help you recover from the anaesthetic and make you more alert. If you have chest problems such as asthma or bronchitis, it is even more important for you to do these exercises to reduce the risk of a chest infection.

Relax your shoulders and upper chest. Take a deep breath in through your nose; hold the breath for four seconds, then breathe out through your mouth. Following the fourth breath, cough deeply from the belly do not just clear your throat. Try to do this every hour during your stay in hospital.

Circulation and strength exercises
It is important to keep your circulation moving. Vigorous, rhythmic pumping of the muscles in the lower leg will help you to do this. See exercises 1 and 2.

The following pages show exercises that you can practise with the guidance of your physiotherapist. Start by completing five repetitions of each exercise and as you get stronger increase the repetitions until you can manage 20 of each exercise.

Practise all the exercises shown 4 times a day

In addition, once you are independently mobile with the use of walking aids, aim to stand and walk every hour of the day that you are awake.
### Exercises following total hip replacement

<table>
<thead>
<tr>
<th>Exercise Description</th>
<th>Image</th>
</tr>
</thead>
<tbody>
<tr>
<td>This exercise is for your circulation. Lying or sitting with your back supported, bend and straighten your ankles briskly.</td>
<td>![Foot exercise]</td>
</tr>
<tr>
<td>This is a further circulation exercise. Whilst lying or sitting with your back supported, now circle your ankles in each direction.</td>
<td>![Circle ankles]</td>
</tr>
<tr>
<td>Lie in a comfortable position. Tighten your thigh muscles by pushing your knee down on to the bed and pulling your toes up towards you, keeping your knee straight. Hold for five seconds then repeat.</td>
<td>![Tighten thigh muscles]</td>
</tr>
<tr>
<td>Lying or sitting in a comfortable position, squeeze your buttock muscles tightly together. Hold for five seconds relax and then repeat.</td>
<td>![Squeeze buttock muscles]</td>
</tr>
<tr>
<td>Lie in a comfortable position. Bend your knee up towards you, keeping your heel close to the bed. Lower slowly. Repeat X10</td>
<td>![Bend knee]</td>
</tr>
<tr>
<td>Whilst lying in a comfortable position keep your knee straight and slide your leg towards the edge of the bed and back again. Do not roll your leg outwards; your toes should always point to the ceiling.</td>
<td>![Slide leg]</td>
</tr>
</tbody>
</table>

### Notes
- Whilst sitting on a chair with your thigh fully supported, tighten your thigh muscle and raise your foot until the leg is fully straight. Lower slowly. Do not lift your knee higher than your hip.
- Standing in an upright position with your upper body still; hold onto something fixed for balance. Move your weak leg sideways away from your body and then back to the centre. Move in a controlled manner keeping your kneecap facing forwards.
- Standing in the same position as for the above exercise. Move your weak leg forwards and upwards bending at both the hip and the knee towards a 90° angle, but no further. Slowly lower the leg to the ground and repeat.
- Standing in the same position as the previous two exercises. Keeping your knee straight move your leg directly backwards as far as comfortably possible and then back to the starting position. Keep your upper body still throughout.

**If any of the exercises in this leaflet are causing you sharp pain, stop that exercise immediately and ask your physiotherapist for further advice but please continue with all other exercises.**