

What is hip replacement surgery?

A hip replacement is a common type of surgery where a damaged hip joint is replaced with an artificial one (prosthesis). The hip joint is one of the largest joints in the human body and is known as a 'ball and socket joint'. In a healthy hip joint, the bones are connected to each other with bands of tissue (ligaments).

The bands of tissue are lubricated with fluid to reduce friction. Joints are also surrounded by a type of tissue that is designed to help support the joints and prevent bones from rubbing against each other (cartilage).

Many of the conditions treated with a hip replacement are age-related, so hip replacements are usually carried out in older adults aged over 60. However, there may be occasions, such as a severe hip fracture, where hip replacements may occasionally be performed in younger people.

The purpose of a new hip joint is to:

- relieve pain
- improve the function of your hip
- improve your ability to move around
- improve your quality of life.

Patient eligibility criteria:

If supported by the patient's family doctor then patient's local NHS commissioning organisation will **ONLY** fund this treatment if the patient meets the following criteria:

- other options, such as medication, physiotherapy, walking aids, home adaptations and general counselling, have failed to help lessen the patients pain and disability, **AND**
- does not respond to pain killer and loss of hip function is affecting the patients quality of life, **AND**
- the patient must accept and want surgery as the rehabilitation process after surgery can be a demanding time and needs commitment, **OR**
- the destruction of the patient's joint is so severe that delaying surgery would increase the technical difficulty of the procedure.

Should a patient meet the above criteria and be assessed as appropriate for surgery, if they have a BMI of 25 or more they will be actively supported to engage with local weight management programmes to reduce their BMI to improve the likelihood of a successful hip replacement. A patient's BMI alone however will not be a reason to prevent surgery happening.

The clinician in charge of the care of the patient's specific condition, usually a hospital doctor, can assist the application, if there is exceptional clinical need for the treatment to be funded. The patient's clinician must evidence clinical exceptionality and must be supported by the patient's local NHS commissioning organisation. See separate leaflet for more information on Individual Funding Requests (IFRs).



How hip replacement surgery is performed:

A hip replacement can be carried out when the patient is asleep during the procedure (under general anaesthetic) or when the lower body is numbed (epidural). The surgeon makes an incision into the hip, removes the damaged hip joint and replaces it with an artificial joint made of a metal alloy or, in some cases, ceramic. The surgery usually takes around **60-90 minutes to complete**.

Alternative surgery:

There is an alternative type of surgery to hip replacement, known as **hip resurfacing**. This involves removing the damaged surfaces of the bones inside the hip joint and replacing them with a metal surface. An advantage to this approach is that it removes less bone.

However, it may not be suitable for:

- **adults over the age of 65 years** – bones tend to weaken as a person becomes older
- **women who have gone through the menopause** – one of the side effects of the menopause is that the bones can become weakened and brittle (osteoporosis).

For more information search for 'hip replacement' at www.nhs.uk

Or to read the 'osteoarthritis of the hip decision aid' visit sdm.rightcare.nhs.uk



Treatment policy for patients covered by NHS Solihull, Birmingham CrossCity and Birmingham South Central Clinical Commissioning Groups.