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Transforming patient information into patient understanding.

Last week I covered the different types of hip fractures. Hopefully this gave you an increased awareness of the differences in hip fractures that occur. Those differences have everything to do with how the different fractures are treated.

Almost every hip fracture is operated upon when the injured patient is in optimal condition to have surgery. Getting the patient ready for surgery can take up to a few days. As soon as it can be done safely is always best for the injured patient. Most hip fracture patients are older and do not tolerate being in bed for a long period.

Modern treatment of hip fracture aims to get you back on your feet again as soon as possible while the broken hip heals.

Types of Surgery

- Femoral neck fracture
  Surgical screws are used to hold the ball on the femur if the bone has not moved out of place too much. If you are older and if the fracture is displaced you may need a high strength metal device that fits into your hip socket replacing the ball part of the hip.

- Intertrochanteric fracture
  A metallic device (compression screw and side plate) holds the broken bone in place while it lets the ball move normally in the hip socket.

- Subtrochanteric fracture
  This more complicated type of fracture requires special types of strong metal lag screws, rods and plates to hold it together while healing progresses.

Time to Healing

After surgery when I go to meet the family the first question always is “How is she (he)?” That’s the easy one to answer. Then someone in the group asks, “How long will she (he) be laid up?” It’s impossible to answer accurately right after surgery, but for most of our older patients it is several months. Most of the patients have
had medical problems before the fractured hip. The fracture makes everything much worse.

**Early Activity**

The reason to do the surgery in the first place is to be able to relieve pain and to be able to get the person up in a chair, then stand and walk at the earliest time.

This is the work of the Physical Therapist who is a tremendous help to the patient. A walker or crutches are always needed at first.

Getting people going after hip fracture can be challenging because of age, weakness and other medical conditions.

A large number of patients need to go to a Rehab place for a variable time before going home.

I stay involved and see the patient periodically until the fracture is healed which can take months.

Hip fracture is a classic Orthopaedic problem. It is often among the most challenging types of surgery I do, but also the most rewarding and gratifying.

**Website and Archive**

The new and improved office website [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com) has a ton of great information about hip fractures and all the things I treat in the office and hospital. It also contains the Archive of all 99 Gratiot County Herald Orthopaedic Connection articles I have written for you to date. Check it out for something you may have missed.

Our goal is simple – To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush