Managing Osteoarthritis of the Hip

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As an Orthopaedic Surgeon who sees patients with hip arthritis I do total hip replacements. Occasionally I will see a patient who has seen another surgeon. In taking the history the patient often says the doctor told me I have hip arthritis and I should come back when I can’t stand it anymore and he will do a hip replacement. I then ask what did you do? The patient replies I didn’t have a chance to say anything because the doctor was already out the door.

“Isn’t there anything else I might do short of surgery?” the patient will ask.
Well, yes there are some other things. The “anything else” of course depends on certain things individual to each patient. Age, size, overall health, etc.

We will assume that this imaginary patient has tried OTC medication Tylenol, Ibuprofen or Naproxen. Possibly even prescription medication. Maybe a cane or walker if they are not too proud!

In the office after an exam of the affected hip, back and leg I would usually do plain x-rays of the hip. That usually gives me a very good idea if hip arthritis is present. Often pain to the side of the hip is caused by bursitis and is not hip arthritis at all. But that is a subject unto itself that I have written about before.

If the hip pain is caused by true arthritis I have to decide if measures less than total hip surgery might be a benefit. Such as -----

- Physical Therapy
- Hip joint injection in x-ray department
- Home exercise program
- Manual therapy

Physical Therapy
In osteoarthritis of the hip the surrounding soft tissues – muscles, capsule, tendons and ligaments that support the hip can become inflamed, tight and painful. A skilled physical therapist can often mobilize the joint leading to a more mobile, less painful joint.

Manual Therapy
Manual therapy is an extension of Physical Therapy. It uses deep tissue massage around the joint – front, back and side. This technique is also helpful to relieve inflammation and decrease arthritic pain.

This manipulative therapy is used by massage therapists, and physical therapists trained in the technique. Patients with advanced osteoporosis and rheumatoid arthritis need to be carefully examined to determine if manual therapy is an option for pain relief.

My patients put their trust in me and what I do improves the quality of their lives.

Gratiot County Herald Archive and Office Website
I hope what you have read has raised questions. No problem!
Please log onto www.orthopodsurgeon.com. It has a huge amount of musculoskeletal information in the Website and the Archive of all previous GCH articles.
Check it out and be amazed what you can learn.
Good health. Good life. All the best to you. Be well.

Dr. Haverbush