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Hip dysplasia

and Hip

dislocation

What is hip dysplasia?

Hip dysplasia is a condition where the hip joint develops or aligns abnormally. It happens when the hip socket is shallow or improperly formed, causing the thigh bone's ball-shaped end to not fit properly within the socket. This can lead to Hip dysplasia can be present from birth or develop later in life.



What are the symptoms of hip dysplasia?

- Instability
- Restricted mobility or flexibility on one side
- Legs of different lengths
- Uneven skin folds on the thigh
- Limping, toe walking, or a waddling gait
- If untreated, may result in osteoarthritis or hip dislocation.



What is the diagnosis of hip dysplasia?

- Physical examination: The doctor will carefully assess for signs of hip dysplasia, including listening and feeling for "clunks" as the hip is manipulated into different positions.
- Specific maneuvers: The doctor will perform specific movements to evaluate the hip's stability and determine if it can be dislocated or repositioned.
- Hip ultrasound: may be ordered to obtain images of the hip bones and assess for signs of dysplasia.
- X-rays: Older infants and children may undergo hip X-rays to obtain detailed images of the hip joint.



What is the treatment of hip dysplasia?

Observation: Mild cases of hip dysplasia, especially in infants, may be closely monitored by the doctor over time.

- Pavlik harness: Commonly used for infants, this harness stabilizes the hip joint, allowing proper alignment and development. It is worn full-time for weeks to months, gradually reducing usage as the hip improves.
- Spica cast: Used in more severe cases or when the Pavlik harness is ineffective, a spica cast holds the hips and legs in a specific position to promote proper alignment and development. Duration of casting varies.



Pavlik harness

What is the treatment of hip dysplasia?

- Closed reduction: If the hip remains dislocated or unstable despite conservative measures, a closed reduction is performed. The hip joint is manually repositioned under anesthesia, followed by a spica cast to maintain the corrected position.
- Surgical interventions: In persistent cases, surgery may be necessary for older children, adolescents, or adults. Options include hip osteotomy, open reduction, or hip replacement in severe cases.
- Physical therapy: to improve hip joint stability, strength, and range of motion. It can be beneficial before and after surgical interventions.



Sources and References:

All illustrative images from <u>www.canva.com</u>

https://www.mayoclinic.org/diseases-conditions/hip- .1 dysplasia/symptoms-causes/syc-20350209

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