Coxarthritis (Arthrosis of the hip)

Hip joint is composed of two bones: the femoral head and the acetabulum or socket which forms part of the pelvic bone. This joint is maintained in its place by strong ligaments and muscles and covered by a fine coating made out of cartilage that permits a wide range of motions - which allow us to walk, run, jump, sit and perform all of our daily activities.

Hip joint supports all of our body weight, and because of all of our daily activities it is prone to suffer from cartilage wasting that occurs both on the femoral head and the acetabular surface (socket). This degeneration and further destruction of cartilage surface of the hip joint is known as “arthrosis” or “coxarthrosis”.

This problem is accentuated by pathological conditions resulting from:

- Anatomical alterations of the hip during pregnancy and birth.
- Congenital and hereditary factors.
- Work related high physical demand.
- Sports related high physical demand.
- Trauma.
- Old Age.
- Excess weight.

The main symptom of hip arthrosis is PAIN. Pain is generally felt surrounding buttock or groin area, but it can descend as low as the knee. At the beginning it is considered as mild pain and can be diminished by the use of simple over-the-counter pain relievers. As cartilage degeneration and destruction advances, pain increases and limits daily activities such as walking and sitting. Thus it gets harder to control pain with over-the-counter medications.

During advanced state of the disease, pain can become constant - it is present even during rest, while lying down and during sleep. Cartilage is completely destroyed and there is direct contact between bone resulting in painful friction between surfaces. Patients may also note crackling in the hip, shortening of the limb, limping and diminished movement about the hip, with progressive limitation of daily activities.

This is a common problem that affects men and women over the age of 60, but it is not infrequent to find this problem in younger patients.

Evaluation:

With a series of questions and a complete medical evaluation, orthopaedic surgeons will determine if you have arthrosis of the hip. He/she will concretize this diagnosis with the use of regular x-rays and if necessary, special x-rays, CAT scan or an MRI.

Treatment:

Hip arthrosis is considered a chronic degenerative disease. This means that there is NO CURRENT TREATMENT that can CURE this problem. Treatment is individualized and is focused on pain management and prevention of accelerated cartilage degeneration. Initially treatment consists of painkillers, exercise, weight control, and limiting of harmful movements and activities such as jumping, running and carrying heavy objects. Use of a cane in the hand contrary to the diseased hip, and physiotherapy are two other treatments that are frequently used.

When the above treatment cannot adequately control pain, then it is time to consider a hip replacement. This procedure is known throughout the world to have a very high success rate. Your surgeon will guide you with regard to the best moment to have the surgery done and which implant will suit you depending on factors such as age, weight, activity, deformity of the hip joint and personal expectations.
Nowadays hip replacement is considered the gold standard for treatment of hip arthrosis. It is a highly successful surgery, and is relatively safe with under 2% of serious complications. The majority of patients who have undergone hip replacement surgery greatly improve their quality of life.

Dear patient: if you have any doubts or questions regarding hip replacement surgery, please contact us to let us know all your worries. Remember that we are here to help you.

Dr. Isaac E. Cervantes O. & Dr. Stefan Martínez van Gils.

NOTE: The main reason for the above information is to aid patients. We are not responsible for the decisions made by patients without previously consulting their attending physician.