

A New Approach to Hip Replacement Surgery

By David W. Miller, Sr., MD

A question frequently asked by patients contemplating hip replacement surgery is, “When will I be able to return to normal activities?” Thanks to a new surgical approach, the answer may be, “Sooner than you think!”

Minimally Invasive Hip Joint Replacement using a Direct Anterior Approach is a specialized technique that allows patients to return to normal activities soon after surgery. Over the past quarter century, Minimally Invasive Surgery (MIS) has revolutionized many fields of medicine, including orthopaedic surgery. Its key characteristic is the use of instrumentation that allows the physician to perform joint replacement through a smaller incision.

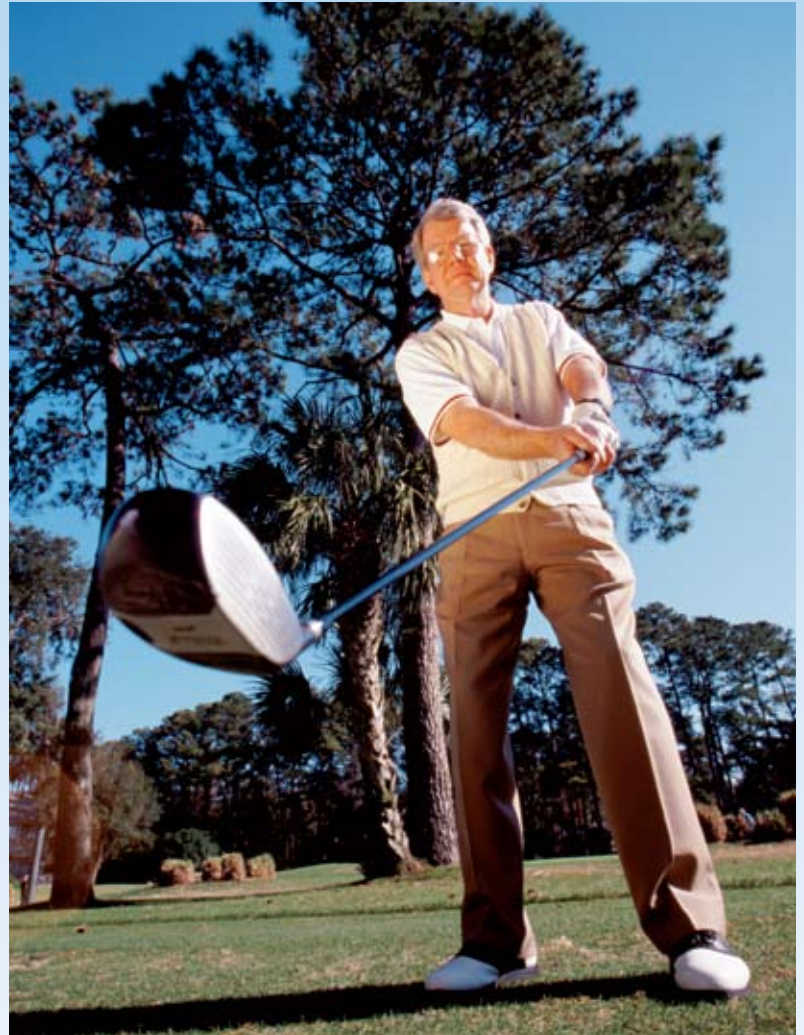
The direct anterior approach is one of the MIS techniques used for hip joint replacement. Continuing orthopaedic experience suggests that this approach may offer several advantages over traditional hip replacement.

Traditional hip replacement involves an incision over the side (lateral) or back (posterior) of the hip joint, which requires significant joint disturbance, cutting of some hip joint musculature, and an incision measuring 6 to 10 inches. In comparison, the direct anterior approach requires an incision that only measures 3 to 4 inches, located in the front of the hip. With this incision and approach, the surgeon does not need to detach or cut any hip joint musculature. This may allow for a more natural return to normal function and activity.

There is also potential for rehabilitation to be quicker (and length of hospital stay to be decreased) because the hip is replaced by muscle sparing technique, providing for less muscle weakness, complete weight bearing, and a faster return to normal gait pattern after surgery.

The smaller incision and reduced muscle disruption indicate that patients who have this procedure may have a shorter recovery time and less scarring. With this approach and the minimization of muscle damage, there may also be less blood loss, less time in surgery, and reduced post-operative pain.

In addition, the hip dislocation precautions that are standard with traditional hip replacement techniques are not as much of a barrier with the direct anterior approach. Typical precautions after traditional surgery include not crossing your legs, not bending your operative hip to more than 90 degrees, and not turning your operative leg excessively



inward. With the new approach, patients are able to do all of these activities immediately after surgery because the risk of dislocation is significantly diminished.

So as you sit and listen to patients' fears about undergoing total hip replacement, recognize that a new procedure—MIS Hip Replacement using a Direct Anterior Approach—might be the right answer for the all too important issue of returning to normal life activities after surgery.



Dr. David Miller, Sr., began his medical training at Georgetown University Medical Center and continued his training with the army at Tripler and Walter Reed Army Medical Centers. Dr. Miller's practice at the Chippenham office includes total joint replacement, knee, shoulder and arthroscopic surgeries.