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Hip Osteoarthritis | Surgical Referral Guide

NON-SURGICAL TREATMENT MODALITIES:

- Weight loss: Several times body weight goes through a joint during impact loading. As you can imagine, reduction of body weight can significantly alter patient's pain experience
- Non-impact aerobic exercise prescription: There is moderate quality evidence to suggest that physical therapy may help reduce pain & improve function in patients with mild to moderate symptomatic osteoarthritis.
- Analgesic &/or anti-inflammatory medication: *High quality studies show that NSAIDs can be used to reduce pain & improve function when not contraindicated
- Walking aides

If these measures fail to improve pain adequately to allow improved quality of life an intra-articular injection of steroid may be helpful. Intra-articular steroid injections can improve pain & function in the short-term but there are risks associated with their use (Infection, rapidly progressive osteoarthritis, rapidly progressive osteonecrosis).

*American Academy of Orthopaedic Surgeons Management of Osteoarthritis of the Hip Evidence-Based Clinical Practice Guideline. aaos.org/oahcpg2 Published 12/01/2023

REFERRAL **REQUIREMENTS:**

If a patient has failed all non-surgical options & is being considered for a total hip arthroplasty, please include diagnostic imaging & ensure that their general medical health is optimized prior to referral to Orthopaedics.

- Ensure that a weight bearing AP pelvis & AP & Lateral of the affected hip has been done within 4 months of the referral Ensure that back pain, referred pain, radicular pain, etc has been ruled out with an appropriate history, physical exam & imaging studies Patients must be nonsmokers for a minimum of 3 months prior to surgery All pending dental work must be
- addressed prior to surgery
- BMI must be less than 35
- Have A1C less than 8.0% (stricter control may be surgeon - or patientdependent)