

Possible Complications of Total Hip Replacement

Even the safest operation has possible complications. Fortunately, these complications are not very common with total hip replacement. Most complications occur within a few weeks after surgery; some occur later.

Dislocation occurs in only 5% of patients, usually before the ligaments have had a chance to heal. Relocating the joint, usually under anesthesia, heals a dislocation.

Damage to the sciatic nerve has been reported in less than 2% of cases. Most of these complications resolve themselves spontaneously, but residual damage may require a foot brace.

Pulmonary embolism is a rare but potentially dangerous complication that occurs in less than .3% of patients. Blood thinners given postoperatively and exercises you will learn encourage circulation, which will minimize the chances of this complication occurring. Symptoms of this included shortness of breath, coughing up blood, weakness and energy loss and in severe cases even fainting or loss of consciousness. If any of these symptoms appear to be present seek emergent help immediately. Although less symptomatic, swelling in the lower extremity along with progressive edema and or pain can be a sign clots in the leg which may result in these above symptoms which can be life-threatening. For more detail regarding this please refer to the webpage under the title of "Deep Vein Thrombosis"

Infections, which may require removal of the prosthesis, occur in only about 2% of patients. Even less common are the late infections occurring more than 6 months after surgery. While rare, these blood-borne infections point out the need for prompt treatment of problems such as tooth abscess, skin infection, or bacterial pneumonia. Prevention of infection starts with preoperative preparedness. One of the simplest thing is to solve is gentle hygiene and correction of any chronic infection of the mouth or that matter any (underline any) potential infectious area of the body. Additionally if you have a history of infections or if in your family history you could be a carrier of bacteria. Often this is a situation where one does not fight infections successfully and may require additional precautionary measures both pre and post operatively. Be sure to inform me or my staff of this issue.

Leg length differences sometimes occur if adjustment of the leg length is needed during surgery. This may require a shoe lift on the shorter limb.

Fractures can occur, especially in minimally invasive surgery. These have been reported to be high as 20%, which may result in the need for fracture fixation.

A major late complication is loosening of the implant. Approximately 3% of patients experience this problem after 5-10 years. Younger, more active people have a high incidence, and patients over 65 have a lower incidence. Ever-improving techniques will hopefully decrease this complication. Fortunately, total hip replacement has the best success rate of all orthopedic procedures, and few patients experience any of these complications.

As with any anesthetic, heart attack, strokes, organ failure, or combinations of the above can occur. Our job is to troubleshoot and make sure your stay and recovery with us is the safest, most efficient possible. My staff and I value the trust you have in us and will strive to make your recovery uneventful and complete.