

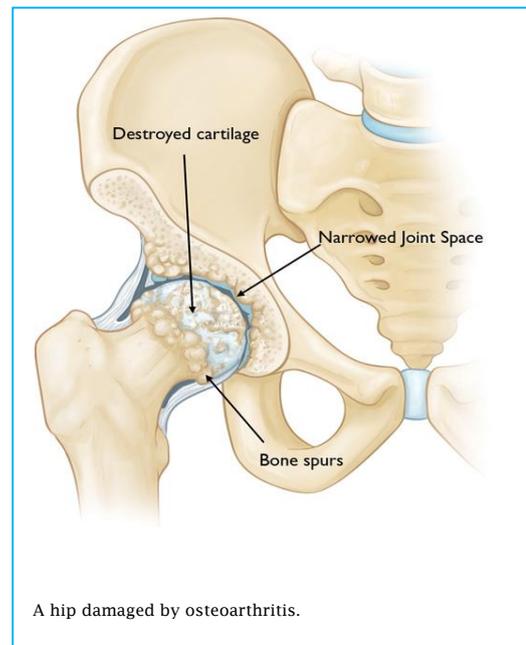
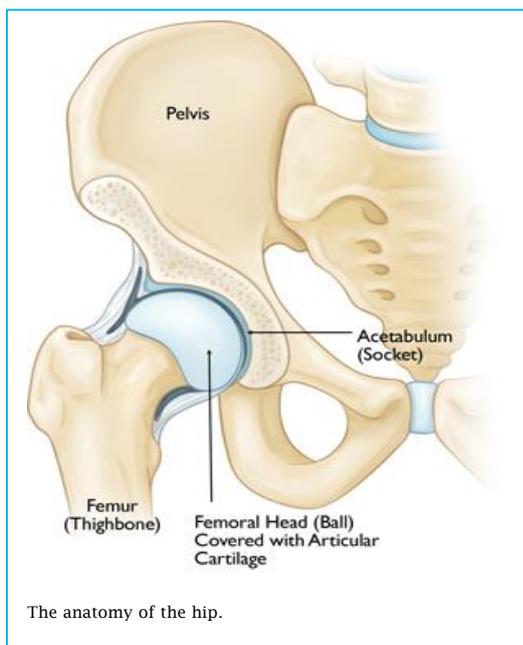
Patient Information: Hip Arthritis

This information is a general overview only and does not replace specific medical advice about your condition and how best to care for it.

Introduction

About one in four people over the age of 65 has worn joints. Hip arthritis is the third most common joint affected by arthritis after the knee and hand. By far the most common type of arthritis is osteoarthritis. This is a gradual wearing out process of the cartilage layers inside the hip. In its end stage, the cartilage inside the hip is completely worn away and bone on bone movement begins to happen with every step. This leads to pain and stiffness.

The hip joint is made up with a ball (femoral head) and socket (acetabulum). In a normal, healthy hip the ball and socket are lined with smooth cartilage which allows easy movement. Arthritis occurs when this cartilage layer is eroded exposing the underlying bone. This smooth layer become rough and the joint then becomes stiff, swollen and painful.



There are many causes or types conditions that leads to this common end-point:

Osteoarthritis

- This is by far the most common arthritis in the hip. This is essentially age related wear and tear.

Autoimmune Arthritis

- Some general autoimmune conditions erode joint cartilage. The most common form of this type is arthritis is Rheumatoid Arthritis.

Avascular Necrosis

- This is a problem with the blood supply and nutrition commonly to the ball of the hip joint that causes the bone to die and often collapse leading to arthritis.

Post- Traumatic Arthritis

- An injury to the joint prematurely roughens or damages the cartilage which wears out over time. This process may happen months to years after an injury.

Birth Defects and Growth Disorders

- Structural changes to the hip joint from birth leads to abnormal wearing out of the hip joint, leading to arthritis.

What are the Symptoms?

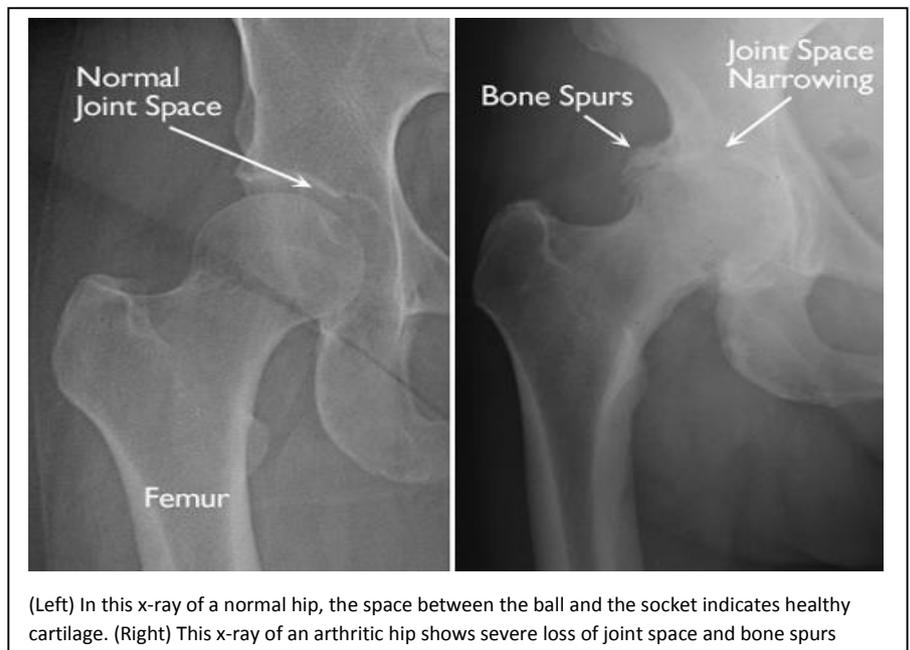
The symptoms of arthritis can vary considerably from person to person. Arthritis tends to come on slowly, over months or even years with a gradual decline in function. There will be days where your hip is very good, and other days where your hip functions poorly without clear reason why.

The most common symptoms are pain and stiffness of the joints. It is often felt deep in the groin, on the side of the hip and down the front of the thigh. These sensations are usually worst with activity initially but can be more constant in later disease. In the later stages the pain affects your ability to sleep well, and the stiffness takes a while to work out, especially first thing in the morning. These symptoms may affect your ability to do normal daily activities, such as walking, putting your shoes and socks on and getting in and out of a car. You may also be aware of other symptoms such as locking, clunking or giving way.

How is it diagnosed?

Your doctor will diagnose arthritis from a combination of the symptoms you describe and the physical examination. Plain x-rays can confirm the diagnosis and give an objective appreciation of the severity of the arthritis. X-rays do not tell us the whole picture however. It will not tell your doctor how bad your pain is. Sometimes x-rays can show tell-tale signs of arthritis in a persons with a pain free hip and similarly sometimes very painful hips have x-rays with less pronounced changes.

Blood tests are only helpful to rule out other types of more rare arthritis.



Is there a cure?

Currently there is no cure for arthritis. While there are many different treatments that can effectively control symptoms, you should be wary of any products or therapy that claims to cure arthritis.

What treatments are there for arthritis?

Because arthritis affects people differently there is no one answer that works best in all situations. Your doctor can recommend which treatments are likely to give you the best results. In general terms, treatment can include any or all of the following:

Weight Loss

Being overweight makes your hip wear out faster and can worsen your pain day to day. Even a modest weight loss of 5% or more (e.g. from 100kg to 95kg) has been shown to improve pain and quality of life.

Physiotherapy

Programs supervised by a physiotherapist aimed at improving flexibility, muscle strength and the way you walk can improve pain and function.

Walking aids

Physical aids can help you function day to day by offloading weight going through the worn part of your hip.

Pain relief medication

Paracetamol is a simple pain reliever that can have dramatic effects in the earlier stages of arthritis. Anti-inflammatory medication may also be of benefit. Always discuss this with your doctor or pharmacist before you take this as they are not always suitable for all people especially if you suffer from stomach ulcers or kidney problems.

Stronger pain medication such as tramadol or codeine may be of benefit if the simple measures listed above are no longer helpful.

Sometimes an injection into the hip of a corticosteroid medicine can help relieve pain.

Anti-inflammatory gels have also been shown to have some benefit in hip arthritis.

Complementary therapies

There are many different over-the-counter preparations available. Listed below are some of the more readily available supplements:

Fish Oils

Oils extracted from fish tissues have a high concentration of omega-3 fatty acids. Some specific subtypes of omega-3 fatty acids have been shown to act as a natural anti-inflammatory thus relieve joint pain. There is better evidence for its use in controlling the symptoms from autoimmune arthritis, such as rheumatoid arthritis although there is some evidence for its use in osteoarthritis. Eating foods rich in omega-3 fatty acids may help your general health but it is unlikely you can obtain enough from your diet without fish oils supplements. Research suggests you need to take a dose of 2.7g omega-3 (EPA plus DHA) per day to reduce inflammation.

Glucosamine

This is a building block of joint cartilage. There is currently no consensus in the scientific literature whether taking supplements of glucosamine improved pain when compared to a placebo (fake pill). The suggested dose is 1.5g/day (glucosamine sulphate).

Chondroitin This is a substance found in the body that is thought to help retain water and essential nutrients within cartilage, keeping it functioning normally. There is no consensus in the scientific literature whether taking supplements of chondroitin improved pain when compared to a placebo (fake pill). The suggested dose is 800 - 1000mg/day.

Recent studies have however shown that taking both chondroitin and glucosamine may be helpful in reducing pain in osteoarthritis.

Acupuncture There are promising results from multiple studies regarding the use of acupuncture in hip arthritis, but there are still some doubts about its effectiveness.

Exercise

This is one of the most important treatments for hip arthritis. It can help reduce pain and maintain your general health. Low impact activities are recommended such as swimming, cycling and walking.

Joint replacement surgery

After discussion with your doctors, the decision to have a hip replacement is yours and yours alone to make. Your doctors will always give you the options and if appropriate offer the surgery. The recommendation is usually made keeping in mind the following factors:

- Pain that has not been relieved by pain killers, physiotherapy or walking aids.
- Pain severe enough that it prevents work, walking, recreation and daily activities.
- Sleep is disturbed due to pain

For online resource to help you best care for your hip, please visit www.myjointpain.org.au