Hip Precautions for Everyday Activities

Patient Information - Occupational Therapy

Total hip joint replacement and dislocation hip precautions

After a total hip joint replacement (THJR) the area around it takes a while to heal. While it heals you must take special care to protect it. By following the recommendations below, you can reduce the risk of your hip dislocating.

Precautions

These precautions **MUST** be followed for **At Least 6-8 Weeks** after your operation or until your surgeon tells you otherwise.

- DO NOT bend your hip more than 90°.
- DO NOT cross your legs at the knees or ankles when standing, sitting or lying.
- DO NOT swivel on or twist your affected leg when standing, sitting or lying. Keep your feet and body facing forward.
- Avoid landing heavily when you sit.

Seating

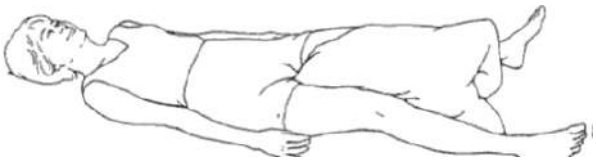
- Sit on a HIGH, FIRM CHAIR preferably WITH ARMS. Your hips should always be higher than your knees.
- If the seat height is below your knees, your occupational therapist will need to raise the chair.
- DO NOT sit on low or soft seats (you will bend at your hips and roll your knees inward).
- DO NOT sit in recliners, lazy boys, rocking chairs or on low stools for at least three months.

Transferring on/off chairs

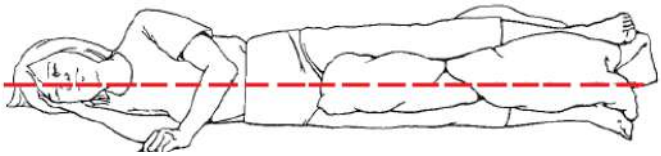
- Hold on to both armrests and have your weight on your unaffected leg.
- Feel for the back of the chair behind your knee before you sit.
- Put your affected leg forward, keep your back straight and lower yourself into the seat.
- Reverse the order to stand, and check you are balanced before moving forward.

Bedroom

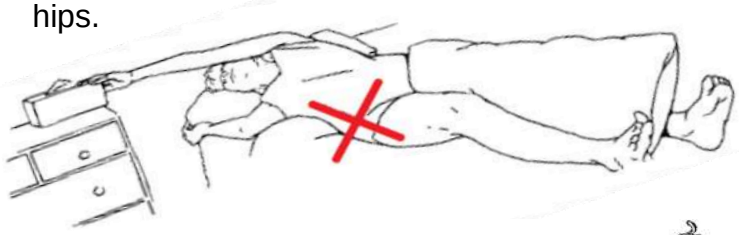
- If possible, get out of bed on the same side as your affected hip.
- Keep your affected leg straight in front of you.
- Take your weight through your unaffected leg and push up from the bed with your arms.
- If your bed is too low it may need raised.
- Sleeping on your back is recommended. Always place a pillow between your knees to keep your legs apart.



- Your affected leg MUST NOT cross the midline of your body.
- If you prefer to sleep on your side, you should sleep on your unaffected side.



- Place pillows between your legs to support your affected leg and then roll onto your side.
- DO NOT twist your affected leg inward or out-ward. Keep your foot pointed forward.
- DO NOT bend forward to pull up blankets. Use an easi-reacher.
- When lying in bed AVOID reaching across your body. This involves twisting at your hips.



Equipment for bed mobility:

- Bed loop
- Easi-reacher
- Bed blocks / raisers

Sexual intercourse

- If pain is not an issue and you have not been told otherwise by your surgeon, you may resume having sexual intercourse 6-8 weeks after your operation.
- With the basic precautions in mind, you may need to consider other positions. i.e. lying on your side.
- Your occupational therapist can provide a pamphlet with specific information on request.

Toilet

Sit down and stand up using the same method as for chairs. Your occupational therapist will provide you with equipment if necessary.

- DO NOT twist your trunk.
- DO NOT bend your affected hip past 90°.

Toilet equipment:

- Raised toilet seat.
- Over toilet frame.

Dressing

- Sit to dress.
- Dress affected leg FIRST and undress it LAST.
- DO NOT reach forward any further than your knees or bring your leg up towards you.
- It is recommended to use long handled equipment for dressing your legs.
- Use a sock aid to pull on socks.
- A long-handled shoehorn can be used to remove socks, and to take shoes on or off.

The shoehorn MUST be used on the INSIDE of your affected leg.

You will not be able to bend at the hips to tie up shoelaces.

Equipment for dressing:

- Easi-reacher
- Long handled shoehorn
- Sock aid
- Dressing stick
- Elastic shoelaces

Grooming

- DO NOT prop or lift affected leg past 90°. You will need assistance to shave your legs or cut toenails.
- Use long handled aids to reach areas like your back and lower legs.

Equipment for grooming:

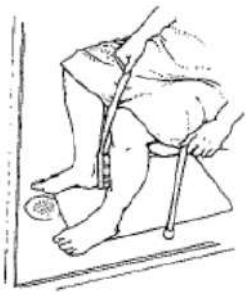
- Leg washer
- Easi-reacher

Bathroom

- DO NOT sit in the bottom of the bath.
- Use a suitable height stool in the shower.
- DO NOT bend past 90° at the hip.
- DO NOT bend at the hip to wash or dry your feet.

Equipment for bathroom:

- Bathboard
- Transfer bench
- Leg washer
- Shower stool



Kitchen

- DO NOT bend down to low cupboards or to pick something up off the floor.
- Store regularly used items within easy reach.
- Avoid standing for long periods on your affected leg.
- Your occupational therapist may be able to provide you with a high stool so you can sit and work at the bench.

Eating

- Your chair must be a height that your hips are higher than your knees.
- Sit up straight and close to the edge of the table.
- DO NOT cross your legs.
- Be careful not to lean forward as you eat.

Aids to assist in the kitchen:

- Kitchen trolley
- Perching stool
- Easi-reacher

Hobbies

DO NOT return to any active sport (golf, bowls, cycling, etc.) until you have clearance from your surgeon.

Car

You MUST NOT DRIVE FOR AT LEAST SIX WEEKS or until your surgeon gives you clearance.

To transfer into a car:

- Have the seat back and reclined.
- Turn to face away from the seat, put your affected leg straight out in front of you and lower yourself down to sit.
- Slide backwards onto the seat until you can lift your legs into the car. Bending your hip as little as possible.
- It is important to lean backwards as you do this to not bend more than 90° at the hips.
- You can place a plastic bag flat on the seat to make moving easier.

Gardening / household

- Avoid heavy gardening (digging, weeding, lawn mowing or using a wheelbarrow).
- Be careful not to do tasks that require you to bend or twist.
- DO NOT bend to pick up or fill pet bowls.
- You will need help to manage household tasks such as changing bed sheets, vacuuming, laundry and cleaning floors.

Aeroplane seating

- Tell the airline about your surgery.
- Ask for a seat with more leg room.
- Ask for extra blankets to raise the height of your seat if needed.
- DO NOT bend more than 90° at the hips.
- DO NOT put anything under the seat in front of you as you cannot bend down to reach it.
- Be very careful not to twist as you get into your seat.

Walking

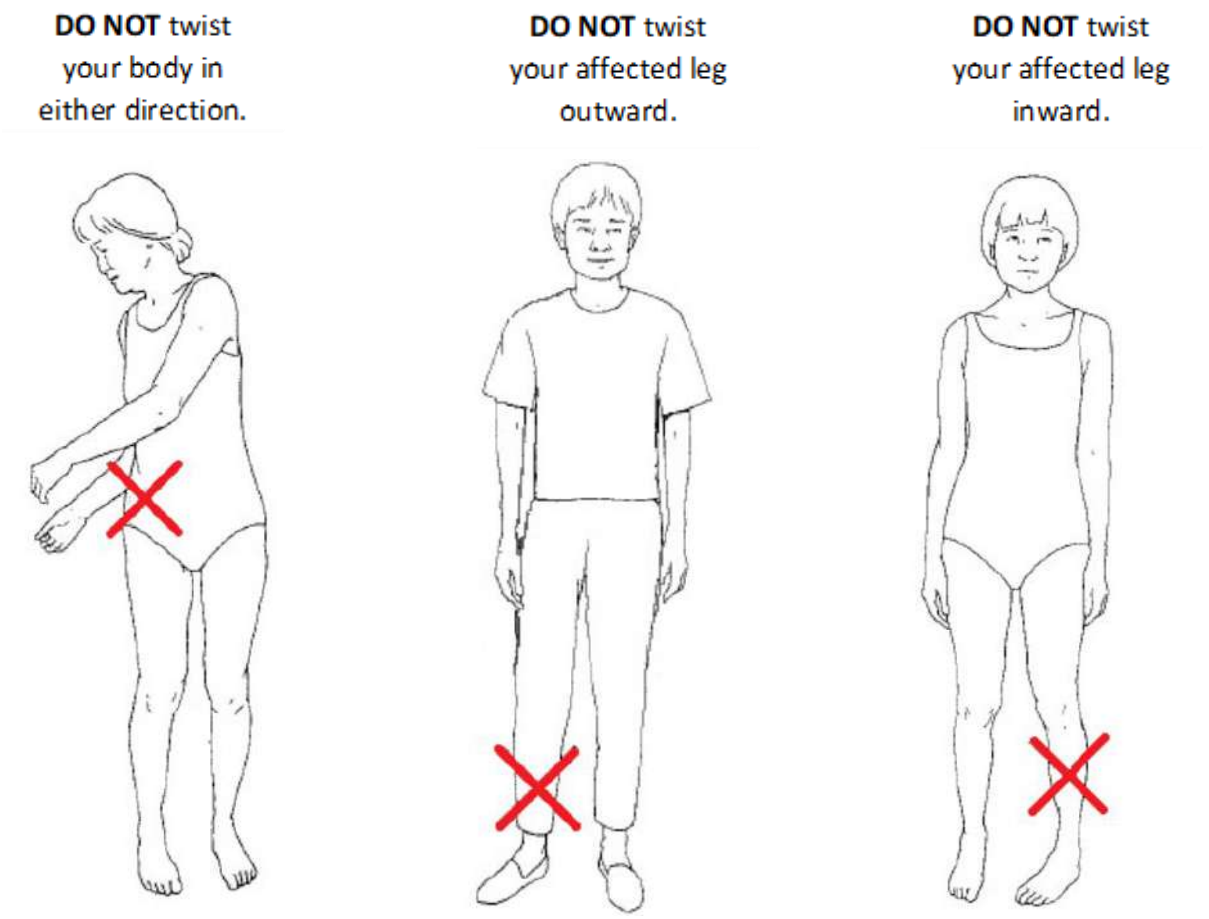
(For more information on mobilising please ask your physiotherapist).

- A physiotherapist will assess your mobility prior to discharge. You will be provided with an appropriate mobility aid if required.
- When turning, lead with your feet. It is easiest to turn toward your unaffected side.

Stairs

UP: Good leg first, Affected leg, then Sticks - GAS goes up.

DOWN: Sticks first, Affected leg, then Good leg - SAG goes down.



Contact information

If you have any questions about the information in this pamphlet, please ask your occupational therapist, or contact the occupational therapy department.

Occupational Therapy Department, Christchurch Hospital Phone: 03 364 0700

For more information about:

- hospital and specialist services, go to *www.cdhb.health.nz*
- your health and medication, go to *www.healthinfo.org.nz*

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