Fact sheet

# Central Adelaide Orthopaedics – Hip & Knee Service

## Clinical Information Sheet

| Clinical Condition | Hip Osteoarthritis |
|---|---|
| **Eligibility** | Activity related pain in hips; may present as pain in the groin, outer hip, buttock and/or pain radiating down thigh to knee joint.<br>Decreased joint mobility.<br>May have stiffness in affected joint that lasts no longer than 30 minutes. |
| **Priority** | **Semi-Urgent:** in presence of protrusio visible on x-ray or signs of avascular necrosis with flattening of the femoral head visible on x-ray.<br>Referrals should be faxed to the RAH on (08) 8222 2751 or the TQEH on (08) 8222 7244.<br>**Non-Urgent:** Osteoarthritis of the hip joint visible on x-ray. Can present on x-ray as loss of joint space, osteophytic lipping, bone on bone.<br>Referrals should be faxed to the RAH on (08) 8222 2751 or the TQEH on (08) 8222 7244. |
| **Differential Diagnoses** | Trochanteric Bursitis<br>Gout<br>Rheumatoid Arthritis<br>Septic Arthritis<br>Fracture<br>Malignancy<br>Buttock and/or Outer Thigh pain may be a reflection of spinal issues causing pain to radiate down |
| **Information required with referral** | History:<br>• Duration of symptoms<br>• Characteristics of pain – location, night pain, etc.<br>• Response to analgesia<br>• Height, Weight & Body Mass Index<br>• Use of natural anti-inflammatories (e.g. high dose fish oil)<br>• Level of mobility - walking distance; walking aid<br>• Function – ADLs<br>• History of infective processes (e.g. poor dental hygiene, recurrent UTI's, etc.)<br>• Brief medical history<br>• Current medications – in-particular, blood thinning medication<br>• Relevant psycho-social issues<br>Exam:<br>• Exclude back pathology as cause of pain<br>• Confirm origin of pain is from hip<br><br>Other medical and allied health practitioners the patient has seen concerning this problem |

Government of South Australia
SA Health

| | |
|---|---|
| **Investigations required with referral** | X-ray: AP Pelvis centred on pubis, AP hip (patella facing up), cross table lateral hip joint<br>*Upon attendance to appointment, patient will be required to bring plain x-rays (views mentioned above) from within the previous 6 months to establish current bony structure* |
| **Pre-Referral management strategies (include with referral)** | Use of simple analgesia as tolerated including a regular paracetamol product (e.g. Panadol® Osteo) and oral NSAIDs if tolerated<br>Use of natural anti-inflammatories (e.g. high dose fish oil)<br>Consider hydrotherapy, swimming or cycling for a low-impact exercise alternative<br>Use of mobility aids (e.g. walking stick or frame)<br>Weight loss measures – A BMI <40 is preferable for surgery (due to significantly increased complication rate associated with higher BMI's. Decision will be at surgeon's discretion.)<br>Use of self-care aids (e.g. raised furniture, toilet seat raiser, pick-up stick, etc.)<br>Home modifications (e.g. hand rails and/or or ramps) |
| **Discharge Criteria/information** | For discharge to GP if non-operative management to be pursued.<br>**Red flags** that should trigger referral back for review: pain in affected joint no-longer managed non-operatively |
| **Fact sheets** | http://www.arthritisaustralia.com.au/images/stories/documents/info_sheets/2013/OsteoArthritis.pdf<br><br>http://www.orthoanswer.org/hip/hip-osteoarthritis/definition.html<br><br>https://www.myjointpain.org.au/factsheets/hips/<br><br>http://orthoinfo.aaos.org/topic.cfm?topic=A00213<br><br>http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/healthy+living/healthy+weight/healthy+weight+loss+tips<br><br>http://www.niams.nih.gov/health_info/hip_replacement/default.asp |

## For more information

**Central Adelaide Orthopaedics – Hip & Knee Service**
**Royal Adelaide Hospital, North Terrace ADELAIDE Telephone: 08 8222 4000**
**The Queen Elizabeth Hospital, 28 Woodville Road, WOODVILLE Telephone: 08 8222 6000**



Government of South Australia
SA Health