



Osteoarthritis of the hip

What is osteoarthritis of the hip?

The hip joint is formed by the top of the thigh bone and the pelvis. Its primary functions are to support the weight of the body and enable the legs to move. The hip joint consists of a ball at the top of the thigh bone which fits into a socket in the pelvis.

Osteoarthritis (OA) of the hip is a common condition which affects men and women of all ages. The cartilage (which normally cushions the bones in the hip joint) becomes damaged. This inhibits the smooth movement of the joint. The chances of it developing increase with age. It is more likely to develop, or to be more severe, if you are overweight because there is an increased load on the joints. Osteoarthritis sometimes settles down and becomes easier to manage. The reason for this is not known.

How will it affect me?

Stiffness and reduced range of movement are common. There can be periods of either days or weeks when your symptoms are more severe. The pain experienced from OA of the hip may be felt in your lower back, buttocks and groin. You might also feel pain from your hip in your leg and down into your knee. This is called referred pain.

If your hip is badly affected, you may have problems walking and be more likely to have a fall. It can be more difficult to stand up or bend down, making it harder to put on shoes and socks and get in and out of a car. The hip might also 'lock' for a few moments. Severe OA of the hip can cause pain when you change positions during sleep. Very commonly, muscles around the joint can waste due to lack of use and become weaker.

REAL LIFE STORY

‘ I first developed a deep ache in my buttocks after going walking. I didn't think that it might be arthritis. It got worse so I had to go to my doctor but they couldn't find anything and eventually I was referred to a rheumatologist who diagnosed arthritis.

I vary my activities so I don't get too stiff from sitting down or too tired from walking too far. I have a large cushion to sit on when driving. I have had to fight my pride and convince myself that I need to use a mobility scooter sometimes, but it has been well worth it because I can get so much further than walking by myself. Keeping up with the latest information and going on an Arthritis Care Challenging Pain course has been really helpful. ’

What is the treatment?

Once your GP has diagnosed OA of the hip, they may prescribe medication. Painkillers will not affect the arthritis itself but should help relieve the pain and



stiffness. You may be given painkillers like paracetamol or non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen. It is important to take NSAIDs with food, and not on an empty stomach. While many people have no problems, NSAIDs can cause indigestion and sometimes stomach bleeding, so you may need to be prescribed stomach medication at the same time. It is important to take your painkillers as prescribed by your GP to ensure they work effectively. If you are worried about the side effects of any of your medication speak to your doctor.

If you can't tolerate NSAIDs or the pain is more severe, your GP may prescribe codeine, which is often taken in combination with NSAIDs or paracetamol.

If painkillers have not reduced the symptoms of OA of the hip, you may be offered a steroid injection into the joint. You will need to avoid strenuous activity, and rest for 24 hours after the injection. You may need to have the procedure repeated every so often. Discuss with your doctor what treatment is best for you.

Who should I see?

Your GP will need to diagnose and treat your condition at first. They should give you information on exercise and weight loss, and may refer you to specialist services.

You may be referred to:

- a physiotherapist for advice on exercise and sometimes for hydrotherapy as well. Some physiotherapists may also provide manual therapy which may help with the pain.
- an occupational therapist for advice on how to carry out daily activities using physical aids and adaptations to the home
- a rheumatologist as they sometimes see people with osteoarthritis
- you may see an orthopaedic surgeon if you have severe symptoms to help determine whether you need hip surgery. See the factsheet *Hip Surgery* at arthritiscare.org.uk/what-is-arthritis/resources

You may find it helpful to take a friend or relative with you to appointments, and also a list of questions you would like to ask.

What can I do to help myself?

Medicines to reduce pain and inflammation will be helpful, but are only one part of your approach to managing your arthritis. Heat and cold pads can be effective in reducing swelling and pain. Do not use these if you have some numbness around the joint. See the factsheet *Home treatment for pain relief: heated pads and cold packs*, and the booklet *Drugs and Complementary Therapies* at arthritiscare.org.uk/what-is-arthritis/resources for more information.

Learning to balance your activities throughout the day with rest will help you do the things you need to. Regular activity is best, so avoid staying in one position for a long time and becoming stiff.



Osteoarthritis of the hip

Equipment and aids

Wearing shoes with thick, soft soles and shock-absorbing insoles can help. Consider using a walking stick to reduce the weight and stress on a painful hip. A walking stick can also help if you have a painful knee. Hold it in the hand on the opposite side of the body to the affected joint. This takes some pressure off the affected joint and can help to ease symptoms.

Think about how your home, car or workplace could be adapted to minimise unnecessary stresses on your joints. Examples include raising the height of a chair to make it easier to stand and sit. People with more severe hip OA may find certain equipment helpful, such as:

- long-handled reachers and shoe horns
- personal care aids (for example, sock aids to reduce bending)
- bath aids
- chair and bed raisers
- raised toilet seats
- perching stools
- half steps and grab rails
- additional stair rails
- a ramp at the front and back steps of your house.

How might exercise help?

Physiotherapy and exercise should be a big part of your treatment. It is important to keep your muscles strong because this will reduce the pressure on your joints. If you are referred to a physiotherapist, you should be provided with a specific exercise programme. It is very important that you follow the programme to give your hip the best chance possible, but keep your physiotherapist updated on how you are finding things.

Muscle strengthening is helpful if you are weak (e.g. have difficulty getting out of chairs). Walking laps in a swimming pool is a good way to strengthen leg muscles. Hydrotherapy likewise can be very helpful because these activities have a low impact on your hips. Walking is also good for exercising the muscles, tendons and ligaments around your hips. If walking is difficult, set yourself reasonable limits on how long you walk. Allow for plenty of breaks to sit down, and try not to overdo it. You may find it best to start with short strides, gradually lengthening the strides as you loosen up. You may also want to try exercising in a class setting as well as at home, as some people find this approach more enjoyable than exercising by themselves. Excess weight creates more stress and pressure for your hips when you are standing, walking



and moving around. Maintaining a healthy weight by combining regular, gentle exercise with a long-term change in your eating habits is the best approach. See Arthritis Care's booklet *Healthy Eating and Arthritis* at arthritiscare.org.uk/what-is-arthritis/resources for more information.

Specific exercises

It is important to do gentle exercises to maintain your range of movement. A few are described below (each should be repeated several times). Speak to your doctor or a physiotherapist before trying these to find out what might be appropriate for you. Some exercises will not be suitable if you have had a hip or other joint replacement. Only exercises which are within your capability should be undertaken.

Exercises for range of movement

- Stand, holding onto something firm like a banister or a table. Then slowly sway your leg back and forth in front and behind you.
- Lie on your back with your knees bent and feet together. Then allow your knees to fall outwards to the sides as far as possible.

Stretching and strengthening the muscles around your hip is particularly important. The exercises below focus on the muscles around your hip to help maintain stability and strength.

Exercises to strengthen the hips

- Lie on your back on the floor or a firm bed, tighten your thigh muscles and push the back of your knees downwards. Hold for 10 seconds then relax.
- Lie on your back with your knees bent and feet flat, lift your bottom off the floor, squeezing your buttocks together.
- Lie on your side, with your bottom leg bent and top leg in line with your body, tighten the front thigh muscle then lift the top leg about 10 inches away from the floor. Hold then lower. Repeat on the other side.

Many of these exercises can be adapted to be done in water which can help take the pressure off the joint.

For more suggestions see the booklet *Exercise and Arthritis* at arthritiscare.org.uk/what-is-arthritis/resources



What about the rest of me?

It's very important not to consider your hip problems in isolation because they can sometimes affect other parts of your body, which in turn can make your hip worse.

Other joints and muscles might overcompensate and become painful and damaged as a result. So do not ignore any symptoms, however small - tell your doctors so they can take everything into account.

Some people experience osteoarthritis in their ankles, feet, hands, wrists and neck. Arthritis Care has factsheets on these joints at arthritiscare.org.uk/what-is-arthritis/resources

Where can I get more information and support?

Arthritis Care is the UK's largest charity working with and for all people who have arthritis.

We are here to help you make positive choices through our information, website, self-management training, and professional helpline. Call the free helpline for confidential support on 0808 800 4050 (09:30-17:00 weekdays) or email: Helplines@arthritiscare.org.uk

You can find support from others with arthritis by joining our online discussion forums.



Arthritis Care and Arthritis Research UK have joined together to help more people live well with arthritis. Read how at arthritiscare.org.uk/merger. All donations will now go to Arthritis Research UK and be used to help people with arthritis live full and active lives in communities across England and Wales, Scotland, and Northern Ireland.

Registered Charity Number 207711, SC041156.

www.arthritiscare.org.uk

Our factsheets are reviewed every 18 months. Please check our website for up-to-date information and reference sources or call 020 7380 6577.

Last reviewed: 2015 Next Review 2018

Note

This information sheet may be photocopied and distributed freely on the condition that it is reproduced in its entirety and that it is not quoted without acknowledgement.



Osteoarthritis of the hip

Contact us

For confidential information and support about treatments, available care and adapting your life, contact the Arthritis Care Helpline

Freephone: 0808 800 4050

09:30-17:00 (weekdays)

Email: Helplines@arthritiscare.org.uk

For information about Arthritis Care and the services we offer, contact us at: **www.arthritiscare.org.uk**

You can also talk to other people who are living with arthritis, through the discussion forums on our website.

Arthritis Care across the UK

Arthritis Care in England

Tel: 0844 888 2111 or 0207380 6511/09/10

Email: Englandoffice@arthritiscare.org.uk

Arthritis Care in Northern Ireland

Tel: 028 9078 2940

Email: Nireland@arthritiscare.org.uk

Arthritis Care in Scotland

Tel: 0141 954 7776

Email: Scotland@arthritiscare.org.uk

Arthritis Care in Wales

Tel: 029 2044 4155

Email: Wales@arthritiscare.org.uk