

Arthroscopic Hip Surgery for Femoroacetabular Impingement (FAI)

The surgical procedure to correct the impingement problems in a hip will often entail dealing with three things:

1. Any articular cartilage damage that has occurred in the joint will be repaired as best as possible
2. The rim of the acetabulum may need to be trimmed and the labrum of the acetabulum repaired where it has been torn
3. The femoral head is re-contoured to remove the areas of bone that result in this not being round

In order to achieve this the leg is put on traction to distract the hip to allow access to the central part of the joint. For this reason the foot and ankle can be a bit uncomfortable afterwards as the foot is strapped into a padded boot and allows the position of the leg to be controlled during the operation. The surgery usually involves making 2 or 3 small incisions over the outer aspect of the hip and the duration of the operation may be from one to two hours.

What to expect after surgery

Following the procedure, there will be a bulky dressing over the wounds and the thigh may be quite swollen. This is because a lot of fluid is pumped into the hip during the course of the procedure and may accumulate in the soft tissues of the thigh. Overnight there may be some leakage of fluid from under the dressing; this is entirely normal. The day following surgery, the dressings will be taken down and small water proof dressings will be used to allow showering and hydrotherapy.

Pain control

On the day following surgery, pain is usually well controlled with simple medications such as ibuprofen and paracetamol. Usually you will be prescribed an anti-inflammatory tablet to continue to take regularly for the week after surgery.

Physiotherapy

The usual protocol is to start hydrotherapy the day after surgery and you will be taught a pool based exercise programme. Depending on the nature of the surgery performed on the hip, you will need to use crutches for about 4 weeks. This will involve sharing your body weight

with the crutches when walking. After 4 weeks you will graduate onto 1 crutch and then no crutches. During this time rehabilitation will involve a low impact exercise programme. Usually we recommend the use of an exercise bike from 2 weeks after surgery and the use of a cross – trainer can usually start at 4 weeks.

Rehabilitation

Although the surgery to the hip is performed in a key-hole fashion, a lot of surgery is done to the hip joint itself, so it must be given enough time to recover. For this reason we usually recommend a low impact exercise programme for 3 months following the procedure. During this time there will be some periods when the hip feels rather irritable, and if this is the case anti-inflammatory medication is usually helpful. Sometimes if the irritability does not settle we organize an intra-articular injection of steroid and local anaesthetic. After 3 months a gradual return to impact sports is planned together with your physiotherapist. Full return to impact sports can take anything from 4 to 9 months.

Success Rate of Surgery

The overall success rate will depend to a significant extent on the amount of damage to the articular surface of the hip joint. If the damage is early and the cartilage damage can be stabilized then we would anticipate that 80-90% of patients will get back to their sport. If there is significant damage to the articular cartilage of the acetabulum that requires techniques such as microfracture to try and get this to repair, then the outcome is more guarded and one may have to accept that impact-type exercise will not be good to return to.

As things stand at present, the scientific literature shows that surgery to the hip for FAI is effective in improving symptoms and returning people to sport provided that arthritic changes in the hip are minor. We do not know whether this procedure will stop the hip from developing osteoarthritis in the future but it is hoped that by intervening before the damage becomes too great the longterm outcome will be improved.