

Hip Arthroscopy

What is a hip arthroscopy?

Hip arthroscopy is performed through small incisions using a camera to visualize the inside of a joint. Through several small incisions (about 1 centimeter each) your surgeon will insert a camera into one incision, and small instruments through the other incisions.

What is the benefit of hip arthroscopy compared to open surgery?

The nice part about hip arthroscopy is that it is much less invasive than traditional hip surgery. This means:

- Early rehab
- Accelerated rehab course
- Outpatient procedure
- Smaller incisions
- Early return to sport

What conditions can be treated with hip arthroscopy?

- **Labral Tear**
The labrum of the hip is a cuff of thick tissue that surround the hip socket. The labrum helps to support the hip joint. When a labral tear of the hip occurs, a piece of this tissue can become pinched in the joint causing pain and catching sensations.
- **Loose Bodies**
Loose bodies are pieces of cartilage that form within the joint. They look like small marbles floating within the joint space. These loose bodies can become caught within the hip during movements.
- **[Snapping Hip Syndrome](#)**
Snapping hip syndrome has several causes, some of which can be treated with hip arthroscopy. If something is catching within the hip joint, hip arthroscopy can be used to relieve this snapping. Also, hip arthroscopy can be used to perform a psoas tendon release in cases of internal snapping hip syndrome.
- **Cartilage Damage**
In patients with focal cartilage damage, meaning not [widespread arthritis](#), hip arthroscopy may be helpful. These patients may sustain an injury causing a piece of cartilage to break away from the surface of the bone. These patients may benefit from removal of that piece of cartilage.
- **Early Arthritis**
This is a controversial topic, as patients who have arthritis pain generally will not benefit from a hip arthroscopy. The patients who tend to benefit have specific finding of impingement (pinching) within the hip joint, and may benefit from removal of the bone spurs causing this impingement. This is only possible in the very early stages of arthritis, and even then may not offer relief of symptoms.

What are the possible complications from hip arthroscopy?

The most concerning complications of hip arthroscopy have to do with several important nerves and blood vessels that surround the joint. Nerve injury is uncommon, but can be a significant problem. The most commonly affected nerves include the sciatic nerve, the lateral femoral cutaneous nerve (sensation to the thigh), and the pudendal nerve. Injury to any of the nerves can cause pain and other problems.

Other possible complications from hip arthroscopy include potential injury to normal structures, infection, and continued pain after the surgery. The rate of these complications is low, but patients need to understand the potential prior to undergoing a hip arthroscopy.

What is the recovery from a hip arthroscopy?

The benefit of hip arthroscopy is that the recovery is much simpler than for open hip surgery. Patients can typically put as much weight as tolerated on the hip immediately following surgery (check with your doctor as some procedures may limit weight bearing).

In the first weeks after surgery, patients work on regaining motion around the joint, and gentle strengthening exercises. Typically, patients work with a physical therapist for assistance with these exercises and stretches.

Most patients can begin light activities (cycling, swimming) within a few weeks. Athletes most often take about 12 weeks for recovery. Again, there are specific procedures that may require a more lengthy rehabilitation, so check with your doctor about the specific plans for your recovery.

Sample Hip Arthroscopy Rehabilitation Protocol

• Phase I - Initial phase

Goal: Regain range of motion within tolerance, decrease pain and swelling, neutralize muscle atrophy

- **Day of surgery**
 - Isometric gluteal sets
 - Ankle pumps
 - Heel slides
- **Post-operative days 1-7**
 - Weight bearing with crutches
 - Isometric quadriceps, gluteals, hamstrings, adductors, and abductors
 - Active assist range of motion all planes
 - Hip mobilization and gentle joint distraction techniques
 - Closed chain bridging, balance drills

• Phase II - Intermediate phase

Goal: Regain and build muscle strength, focus on symmetry/core strength

- **Post-operative weeks 2-3**
 - Wean crutches and normalize gait pattern
 - Increase range of motion limits
 - Gentle progressive resistive exercises
 - Closed chain single leg bridging
 - Open chain hip 4-way
 - Mobilization with movement
 - Proprioceptive/balance work
 - Stationary bike/aqua therapy

- **Phase III - Advanced phase**

Goal: Improve functional strength and endurance, core strength & stability

- **Post-operative weeks 4-6**
 - Continue flexibility exercises
 - Progressively increase resistive and functional strengthening exercises
 - Initiate sport specific exercises
 - Gradual return to sport

Note: Weight bearing may be limited after some surgical procedures with a hip arthroscopy, including:

- Labral repair
- Iliopsoas release
- Microfracture
- Capsulorrhaphy

Individual rehabilitation protocols will vary by patient and procedure, this information is simply a guide to the rehabilitation following hip arthroscopy in some patients