Revision Total Hip Replacement

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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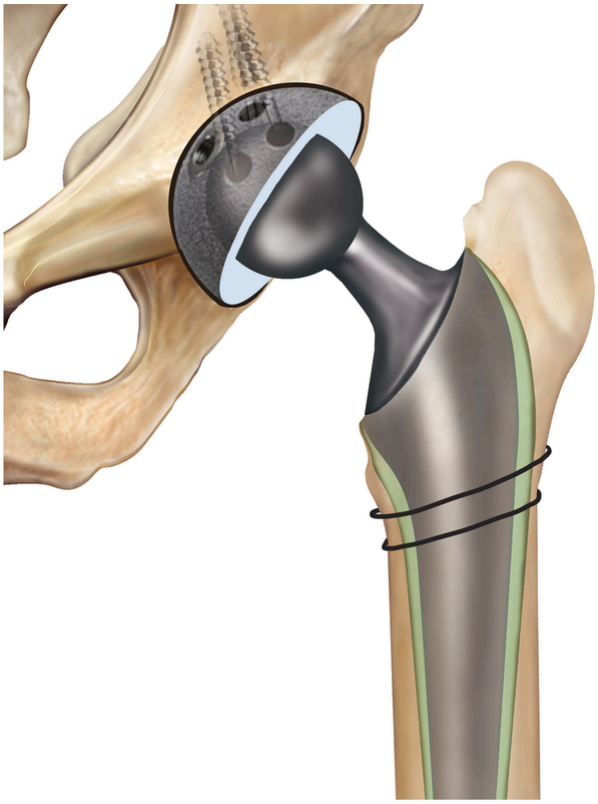
What is a revision total hip replacement?

A revision total hip replacement is an operation to take out parts of your old hip replacement and put in new ones.

A hip replacement can fail for the following reasons.

- Wearing out of the artificial ball-and-socket joint
- Infection in your hip replacement
- Dislocation (coming out of joint)
- Fracture (break) of the femur around your hip replacement

A revision total hip replacement



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What are the benefits of surgery?

You should get less pain and be able to walk more easily.

Are there any alternatives to surgery?

If your symptoms are mild, you and your surgeon may decide to watch and wait for a while.

If you have an infection in your hip replacement, using antibiotics over the long term can sometimes prevent your hip replacement from failing.

If your hip replacement keeps coming out of joint, you can wear a brace to try to keep your hip in place.

If you have a fracture near your hip replacement but the replacement is still well fixed to the bone, your surgeon may be able to fix the break with plates and screws without changing your hip replacement. If the break is small, it may heal without surgery if you rest your leg and use walking aids to get about.

What will happen if I decide not to have the operation?

If your hip replacement is coming loose because of wear or infection, it will probably get more painful over time. The bone around a loose hip replacement can get thin and it may break.

If you have an infection in your hip replacement, it can spread to other places around your body.

What does the operation involve?

Various anaesthetic techniques are possible.

Your surgeon will make a cut on the side of your hip. They will remove your hip replacement and any cement.

Your surgeon will put in a new hip replacement, which is often larger than your old one. Your hip replacement is fixed into the bone using acrylic cement or special coatings on your hip replacement that bond directly to the bone.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

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Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you might need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. Some risks are higher if you are older, obese, you are a smoker or have other health problems. These health problems include diabetes, heart disease or lung disease.

Some complications can be serious.

General complications of any operation

- Bleeding during or after the operation.
- Infection of the surgical site (wound).
- Allergic reaction to the equipment, materials or medication.
- Acute kidney injury.
- Venous thromboembolism (VTE). This is a blood clot in your leg (deep-vein thrombosis – DVT) or one that has moved to your lung (pulmonary embolus).
- Difficulty passing urine.
- Chest infection. Your risk will be lower if you have stopped smoking and you are free of Covid-19 (coronavirus) symptoms for at least 7 weeks before the operation.
- Heart attack. A heart attack can sometimes cause death.
- Stroke. A stroke can sometimes cause death.

Specific complications of this operation

- Split in the femur, if the bone is weak.
- Damage to nerves around your hip, leading to weakness, numbness or pain in your leg or foot.
- Damage to blood vessels around your hip, leading to loss of circulation to your leg and foot.
- Infection in your hip, which can result in loosening and failure of your hip replacement.
- Loosening without infection.
- Bone forming in muscles around your hip replacement (heterotopic ossification).
- Dislocation of your hip replacement.
- Leg length difference.
- Death. The risk is less the fitter you are
- Failure of the revision total hip replacement. You may need another operation.
- Difficulty passing urine.

Consequences of this procedure

- Pain.
- Unsightly scarring of your skin.

How soon will I recover?

You can go home when your pain is under control, you can get about safely, and any care you may need has been arranged.

You will need to use walking aids until you can walk well without them. It often takes longer to recover from a revision hip replacement than your first hip replacement.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Most people make a good recovery and most revision total hip replacements work well.

A revision total hip replacement can fail with time, if it wears out, or the original problem comes back.

Summary

If your original hip replacement fails, you can usually have another operation to do your hip replacement again. If this revision operation is successful, you should be able to continue many of your normal activities.

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Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatment options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

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