

Hip Dislocation

Hip dislocations occur when the head of the thigh bone slips from its socket within the pelvis. You can think of it like the ball coming out of the “ball and socket” joint. In roughly 90 percent of individuals, the thigh bone is pushed from its socket in a backwards type motion, which leaves the hip in a fixed position, twisted and bent in to the middle part of the body. The bone can also end up slipping from the socket in a forward motion. When that occurs, the hip will be slightly bent. The leg will twist away and out from the middle part of the body. Hip dislocations are extremely painful. Patients are normally not able to move the leg. In the event of nerve damage, there might not be feeling in the ankle or foot.

Motor vehicle crashes are by far the most common cause of a dislocation. Wearing your seatbelt will help to significantly reduce the amount of risk involved. Falling from an extended height or an industrial accident has the potential to generate a force that is strong enough to dislocate the hip. In cases of a hip dislocation, other injuries are often present, such as fractured legs and pelvis, head injuries or back injuries. The last time when hip dislocation can occur is following hip surgery, and this can be due to incorrect ball and socket size, or over-aggressive exercising following surgery.

Hip Dislocation Anatomy

The hip is a ball and socket joint connecting the thigh bone (femur) to the pelvis socket. It allows the leg to move. The hip joint is composed of multiple parts, including that of the lesser and greater trochanters. The greater trochanter is the place where muscles from the buttocks allow and meet to promote hip abduction and movement from one side to the other. When it comes to the lesser trochanter, this is the point where the iliopsoas muscle is attached to the hip joint to provide for forward movement within the leg, which is otherwise referred to as hip flexion.

If you have dislocated your hip, you will know about it. The pain you experience will be very bad, and you will be unable to move your leg or put weight through your leg. The pain will be in the groin and radiate to the buttock and thigh. Hip dislocation requires urgent medical attention, so if you suspect it then get to a hospital straight away.

How to Treat a Hip Dislocation:

1. Reduction

If there are no other complications, an aesthetic or sedative will be administered to allow the bones to be manipulated back into their correct position. In certain instances, the reduction has to be done in an operating room under an anesthetic. It might be necessary to use a formal procedure with an incision to help reduce the hip. After treatment, a set of x-rays will be order and possibly a CT scan to make sure the bones are lined up properly.

2. Rehab

Once the hip has been put back into the correct place, rehab will start. The first thing will be to gentle mobilize the hip as the hip will initially be very stiff. After this will come the stability phase, followed by strengthening. Don't rush rehab, hip dislocation is a complicated and often serious injury, and rehab will take several months.

Tips:

- Participating in high impact sports or those sporting activities where a fall can occur puts you at an increased risk of dislocating your hip.
- Dementia, working on ladders and an unsteady gait are all risk factors associated with an increased risk of falling.
- If the hip is weak from inactivity, you might be prone to falls and dislocations.
- Previous hip replacement leaves you at risk for dislocating the hip.
- If you have difficulty walking, moving or standing, you might be dealing with a dislocated hip that needs to be addressed by a medical professional.
- Always rehabilitate following a hip dislocation as there may be other structures damaged such as ligaments, muscles or the labrum.