Perthes Disease

Perthes is a condition in children that is characterized by a temporary loss of blood supply to the hip region. When there isn't an adequate amount of blood, the ball of the hip will disintegrate due to cell death. The area will become inflamed and painful.

Even though the term disease is still associated with the condition, it is really more of a complex series of stages. Treating the condition might require long periods of immobilization of limited movement. For the long-term, the prognosis is quite good. After 18 months to two years of treating the condition most children are able to return to regular activities without any major restrictions.

Perthes is often found in children between 4 and 10 years old. Boys are five times as likely to get the condition as their counterparts are. Close to a century ago, the condition was described as an odd type of childhood arthritis in the hips.

Children can easily end up wheelchair bound, and requiring surgery. Surgery may be performed to rotate the "ball" (head of the femur) of the hip joint. The younger child will often come up with ingenious ways to move around, such as butt shuffling.

Perthes Disease 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 countless 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.

How to Treat Perthes Disease:

1. **Anti-Inflammatory Medication**
   An anti-inflammatory medication can help to lessen the amount of inflammation in the hip joint or the synovium, which is the tissue surrounding the hip joint. Most of the time, these medications are used for a few months at a time. They can either be discontinued or adjusted, based upon where the individual is at in the healing stage. Your doctor will advise which medication it is safe to take.

2. **Physical Therapy**
   Children with Perthes might end up walking with a limp because of the stiffness in the hip. To help restore movement in the joint, children should use crutches and participate in some degree of physical therapy. Children will be shown exercises that they can do until the healing process is complete.

3. **Casting**
   If movement is limited or if testing reveals that there is a progressive deformity developing in the hip, casting might be used to keep the femoral head within the hip socket. Petrie casts will keep the legs apart to allow healing to occur.

4. **Surgery**
   Surgery helps to establish proper alignment in the hip bones. The femur head is placed securely into the socket. Plates and screws hold the alignment secure, which are removed later on. The ball of the hip joint may also be rotated to reduce pressure on one particular part. Expect to spend six to eight weeks in a wheelchair following surgery.

Tips:

- In a small number of instances, the condition runs in families.
- Even though the condition can affect children of all ages, it commonly occurs in 4-8 year olds.
- Avoid engaging in high-impact activities like jumping or running while the condition is bad. Pain will increase and the problem could get worse. Gentle mobility is far better.
- If an operation is performed, it is likely your child will require a wheelchair for a few weeks. Recovery from the operation will take 6-9 months.