

Rhonda's Hip Tips

Each of us has our own unique story and journey through hip replacement. Remember your way will be different and always trust your body to tell you what is best for you.

That being said, here's some important background about my story leading to these tips. I have congenital hip dysplasia, so my replacements came young (51). I had my right hip replaced on 9/20/2017 and my left hip on 5/16/2018. Due to my dysplasia I had to have my hip sockets deepened and screws were required to keep the cups in place within my pelvis. My right femur showed distress during the replacement, so the surgeon placed a cerclage cable (looks like a zip tie) around my femur to support it. This cable caused lots of muscle pain and weakness and my recovery was much slower on the right side as a result (about 7 months vs. 3 months on the left). I had the cable removed 10/31/2018. I let the right hip go for way too long. My right leg has been about ¼ inch shorter than my left my whole life, now they are even! So, I had quite a lot of reconstruction and rearranging done beyond a normal hip replacement. I also have been very physically active during my life and entered these surgeries strong and flexible. This was very helpful to my recovery and informs some of my tips.

What follows is the best suggestions I can offer for preparing for, getting through and rehabbing from a total hip replacement. Please feel free to print and use this document and pass it along. That's what it's for. To read my Hip Adventures which chronicles my own journey, go to <https://www.rhondaashurst.com> and click on that theme in my blog.

Pre-Surgery

- Make sure you vet your surgeon and the team of people who will be helping you through this. Ask about experience. Check online ratings. Ask other medical professionals about their reputation. Their skill is critical to a good outcome. Ask for as many consultations as you need to get your questions answered and feel confident in your team. Write your questions down and the answers. If your clinic offers a pre-surgery joint replacement class, take it!
- Make sure you have insurance coverage for all your providers and the hospital, and that you understand your benefits and what costs you will be responsible for.
- Find a reliable surgery buddy to help you through the first 72 hours. I wanted help nearby for the first 2 weeks on the right hip due to the complications from the cable. If you live alone, have help available on call for the first 2 weeks, but have someone with you for the first 72 hours.
- Do a prehab fitness routine to keep active, flexible and strong. It helps a lot with recovery. Don't do things that hurt you, which will probably include walking. Biking is usually ok. Here's what I did:
 - Qigong practice
 - Tai Chi 24-form practice
 - Yoga, keeping in mind hip limitations. You can also find my favorite poses in the yoga section of my blog.

- Swimming
- Health Rider
- Pilates Fabulous Five (see yoga poses)
- Foundation Back Exercises—from *Foundation* book by Eric Goodman and Peter Park
- Strengtheners for hips and legs:
 - Side leg lifts and clam
 - Seated or reclining front leg lifts and adductor/abductor slides
 - Pilates ring for adduction
 - Band around the knees, squeeze out and slightly up towards bridge
 - Bridge
 - Wall squats (hold for 30-60 seconds), Standing squats
 - Tree (be careful of weakened hip, may need support on that side)
- If you need to lose weight, try to do so. Every pound = 3 on your hips, so you can help yourself by lightening the load. If you are at a good weight, don't lose weight. Your weight will return to what it was before within a couple of weeks.
- Eat well and get good sleep. Minimize stress.
- Control your pain—I used ibuprofen, CBD salve, pain meditations, and limiting activity that aggravated and inflamed the muscles around my hips.
- Make food ahead for 2-3 weeks after the surgery, or get people to bring it to you, which is always fun!
- You will be asked to stop supplements about 2 weeks prior to surgery and ibuprofen within 5-7 days of surgery (blood thinner). I used Arnica (get under tongue tabs on Amazon) and Bromelain to prevent bruising, which was successful. I took Arnica for 5 days before and 3 days after surgery, placing 5 of the tiny tablets under my tongue AM and PM. Bromelain is in my digestive enzymes, so I kept taking those with meals.
- To help stave off the constipation that is a side-effect of the pain meds, I started using Colace (stool softener) at 3 days before surgery (one pill at night). I also stopped eating meat and increased veggies, legumes, and liquids/soups.
- Keep your mental focus positive and don't subject yourself to negativity. If you pray, pray for a perfect result and for help along the way. Hold a positive vision of what you will be like after the surgery and recovery. If you get scared or discouraged along the way, keep coming back to this. Do not let your mind feed on fearful images or negative outcomes.
- Meditation and deep breathing are very helpful practices the whole way through. Start developing the habit before surgery.
- Find good pain meditations you can read or listen to to help you control your pain along the way. Here are some of my favorites: Stephen Levine: <https://www.livingdying.org/softening-pain-meditation/>. His book *Who Dies?* includes some wonderful pain meditations. Shinzen Young: https://www.shinzen.org/wp-content/uploads/2016/12/art_synopsis-pain.pdf. You can check his site for other resources.

- Have lots of pillows and cozy blankets on hand. You will want to be able to prop your foot above your hip for most of the first 72 hours and I did it at night for 2 weeks. If you can get a Deep Vein Thrombosis (DVT) unit, this is a great help in recovery. It is a machine that chills water and runs it through a wrap you place around your hips. It also has attachments for your calves and will compress your calves and hips to keep blood circulating and prevent clotting. I used this unit for my second surgery and it was very helpful for pain and much easier to work with than ice packs! You also don't have to prop toes above nose with the DVT unit. My unit was recommended by my surgeon and covered by my insurance.
- A recliner is hugely helpful for comfort. You may need help reclining it back for the first week or so if it's a hand crank. I spent a lot of my day in the recliner with my feet propped up on pillows, including one under my knees. Wrap yourself in a warm blanket and get some fuzzy socks with stickies on the bottom for traction. You'll love them! I also went to the recliner at night sometimes when I was having trouble sleeping and didn't want to disturb my partner.
- Get comfy clothes. I spent most of my time in a bathrobe or dress in the beginning. Getting in and out of pants is difficult, especially in the bathroom. Wear loose underwear, or I've heard of people putting Velcro in on the sides of some old undies. I used loose fitting yoga or sweat pants and comfy shirts to go to physical therapy. You will likely need help getting dressed for the first week or so. A grabber tool and kitchen tongs are enormously helpful! Go for slip on shoes and slippers. I love my Go Walk Sketchers.
- Equipment to have on hand:
 - Walker
 - Raised toilet seat
 - Cane or trekking poles
 - Large ice packs or DVT machine, heating pad
 - Grabber
 - Shower stool (I didn't use one because we have a stand up, smaller shower stall. It was easier for me to stand up and have a suction hand rail (temporary device you can get at a hardware store) for support.
 - A long-handled shower brush for those hard to reach places like your feet and lower legs.
 - Glad Press 'n Seal. Believe it or not this is the best way to protect your bandage from water. You literally press 'n seal your butt, and it works! Trust me. Just press it into your flesh and smooth out the wrinkles and it will hold. Make sure you have a few inches of border around the bandage.

Post-Surgery

- Rest, but keep pumping ankles and doing PT given at the hospital. Get up and walk 50 feet or so every hour or two. Keep the blood flowing. Get up 1-2 times at night and walk on your walker. This will help keep things flowing, prevent stiffening, and ease pain. It is also very important to prevent blood clots.

- Use pillows to elevate toes above nose first 72 hours, or use DVT unit.
- Ice or use DVT every 2 hours for 20 minutes for first two weeks (except at night); ice after PT through at least 6th week. Can add heat if helpful after week 4.
- Do deep breathing to get the anesthesia out of your lungs.
- **Pain meds:** Figure out the lowest dose of pain meds you can use along with Tylenol. I understand most people are off pain meds by week 3 with hip surgery. I took ½ Tramadol every 6 hours (4, 10, 4, 10), alternated with 500 mg Tylenol every 6 hours (7, 1, 7, 1). I was off the Tramadol by Day 9 on my right hip and Day 4 on my left. Don't stop pain meds cold turkey, taper them, by eliminating the doses one at a time until you are on Tylenol. Valium is helpful for sleeping, which can be difficult when initially coming off pain meds. Valium is also helpful if you are having muscle spasms. Other sleep aids I found helpful: Benadryl and non-THC CBD oil. I was given Celebrex after the second surgery and this was helpful for the inflammation while I was still on aspirin (2 weeks). At 2 weeks, I stopped taking the aspirin, Celebrex and Tylenol and resumed ibuprofen. By week 3-4, I was only using 1-2 doses of ibuprofen a day. I have also found CBD salve is very helpful as a topical pain killer both before and after surgery. (You'll have to wait 6 weeks after surgery for scar to heal before you can use it on scar area.)
- After surgery, I took 100 mg of Colace (stool softener) until I had my first bowel movement (took about 72 hours). I used one Ducolax (stimulant) the night before to get my colon to move. After the first BM, I took 50 mg Colace every day until I stopped the pain meds. I also drank lots of water. I had no problems with constipation, which had always been an issue with my prior surgeries.
- Make sure to drink lots of water to flush your system.
- Play relaxing/soothing music and listen to or read/practice pain meditations.
- Keep positive and relaxed, keep visioning that perfect outcome. Pray.
- Keep antiseptic hand cleaner in the bathroom, makes washing up at first easier.
- Move very slowly and mindfully from prone to sitting to standing. Meds will cause dizziness. Do NOT fall down!
- Use the walker to walk until you can use a cane or trekking poles safely. I was off the walker after the first day on my left hip, but my right took 2 weeks. On my left hip, I used the trekking poles for about a week, but after that it was unnecessary. On my right hip, I needed support for long walks after 6 weeks until about 2-3 months. Keep the cane or trekking poles around for stability for at least 6 weeks.
- **Physical Therapy:** Go to your PT sessions and do what the therapist tells you to do (and only that). If you have pain doing any of your exercises, tell your therapist! Don't keep going past failure of the muscles you are working, or the load will transfer into other muscles which are recruited to compensate. The compensation patterns can cause you problems/injuries over time, so don't do this to your body! Make sure you do exercises at home and set up what you need to have there. Until I could get on the floor again, I found it helpful to have a board on our guest bed with a yoga mat over it to do some of my sitting and lying

on my belly exercises and stretches. Your PT can give you exercise bands to work with at home.

NOTE: On the Bonesmart site they point out that PT is not necessary for rehabbing a hip and they recommend that you walk as you can tolerate it. I found that some of the PT really helped me, but it was easy to overdo it. Above all stay in your Goldilocks Zone (the “just right” place for you)! Stretching helped the most in the beginning, and was helpful all the way through. I videoed my favorite stretches and you can see them, plus all the videos of my recovery along the way at: <https://photos.app.goo.gl/qXWaMSt2tW0TuBJf1>

- Slowly increase your walking over time, but let your body guide you as to how much it can do and what support it needs. Don't stand, sit or walk too much at one time for the first 2 weeks. When those muscles fail or shake, sit down!
- At two weeks my bandage came off. I was careful with my scar, but didn't cover it or mess with it. At 3 ½ weeks, I began to gently massage it with Vitamin E oil (use antiseptic on hands and incision before). At 5 ½ weeks, I began to work the scar tissue along the incision by gently holding the middle and then working out in long strokes to the ends. I used circular massage on the ends where the scar was more fibrous. This quickly reduced the thickness of my scar and made it more pliable, helped it heal faster.

The Do NOT DO List (Posterior Approach)

- Do not bend forward past a 90-degree angle between torso and legs-6 weeks. Pick up things off the floor with a grabber.
- Do not lift knees higher than hips—sit with knees lower than hips. Use pillows to raise yourself up if necessary, especially in car and lower chairs. Ok to begin testing around week 3-4.
- Don't cross legs-6 weeks
- Don't internally rotate leg-6 weeks.
- Don't twist torso while lying or standing, ok to do some while sitting. This wasn't too much of an issue for me. Your hip will tell you when you are pushing a range.
- Don't sleep on your side for first few days (sleep on your back and prop yourself with pillows to stay comfy). After a few days, I was able to put a fat pillow between my knees and sleep on my unoperated side. Operated side is best to stay off for 6 weeks. It will tell you when it can handle your weight. I continue to use the pillow to keep proper body alignment when sleeping on my side. I also put it under my knees when on my back.
- Do not drive for first 2-3 weeks. You must be able to stomp on brake in an emergency and you must be off all narcotics.
- It is recommended that you not travel, especially by air for the first 90 days. When you do travel by air again, be sure to tell TSA about your implant!

- No dental cleanings for 90 days before or after surgery. After surgery, most surgeons recommend a dose of antibiotic before every dental procedure, including cleanings. This prevents infections from going into your implant.

Food:

- After surgery, I resumed my supplements, except ones that thin blood like: fish oil, coQ10, turmeric. Wait until you are off blood thinners like aspirin for those. Take 4 weeks of Align (or similar probiotic). I took 1500 mg daily of Vitamin C for 6 weeks to promote healing.
- I ate soup, chili, salmon & chicken, steamed or roasted veggies, fruit (apples and berries), high fiber crackers and bread, granola with yogurt and berry compote, coffee, herb tea, juice, as much water as you can. Salads were good. Have beef jerky around—I craved red meat protein from the blood loss during surgery.

Resuming Activities

- You can be self-reliant at two weeks. I was faster on my 2nd surgery.
- By 1-2 weeks I could sit in the recliner, open my knee out on the arm rest and use 2 tongs to put on socks.
- Easy Tai Chi (try Tai Chi Chih DVD by Justin Stone) was an excellent way to start working on balance and weight shifting by week 2-3; Qigong practice was great to get going in the mornings. I could do the 24-form sequence by week 4, with modifications (no high kicks).
- At week 2-3, I also started doing some easy yoga on the bed with the board and yoga mat I was using for PT. I also started doing some of the exercises and stretches the PT's recommended I do on my belly.
- I didn't feel like going out, except for PT for the first 3 weeks after my right hip and first week after my left.
- After my right hip, I started driving again at 3 ½ weeks (automatic Subaru). After my left, it only took 10 days.
- At just over 2-3 weeks, I could reach my foot while sitting back in a chair.
- Yoga practice—I was back on my mat at 3 weeks after my right hip and 1 week after my left hip. I resumed much of my practice by 5-6 weeks, except one-legged balances which remained challenging due to weakness in my gluteus medius on my right hip (due to the cable). On my left, I could do most of my practice by 2nd week and could also do one-legged balances.

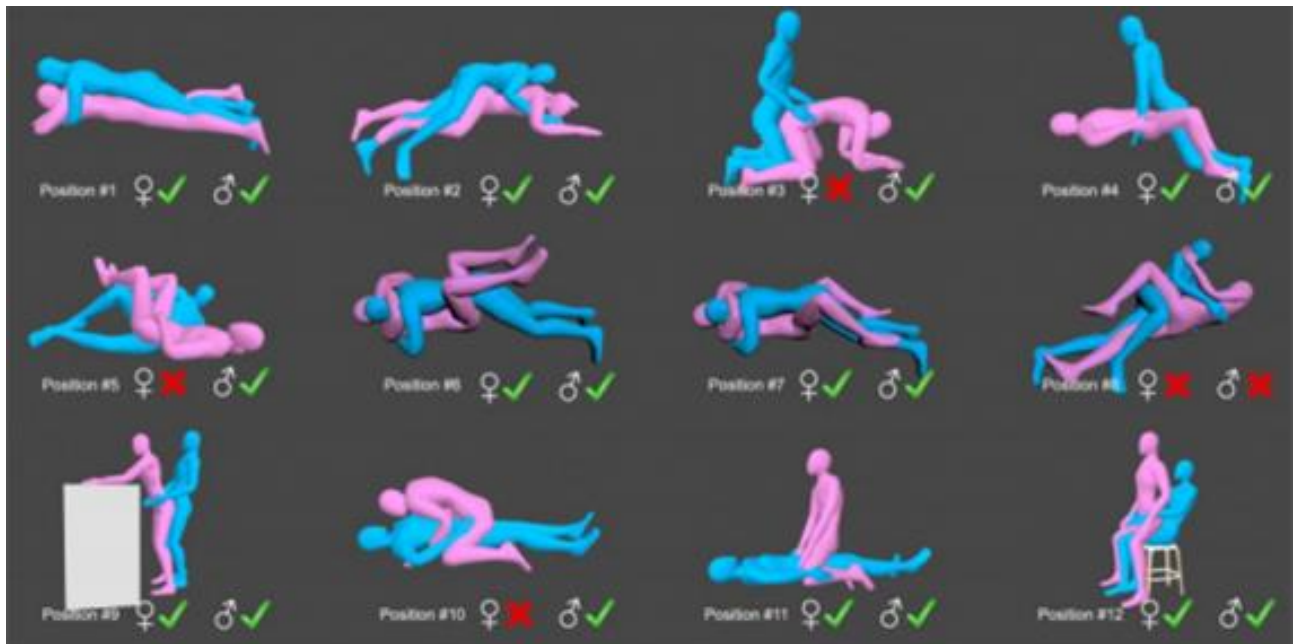
Note: I have practiced yoga for over 35 years and I do not do a demanding practice. You should not expect yourself to do anything beyond what your own body tells you. Be very CAREFUL and MINDFUL of any postures or motions that will stress your hip or push it into extreme ranges of motion which may lead to dislocation! For this reason, it is best not to do Vinyasa flow yoga for awhile.

- By week 3-5, I could bring my foot close enough to my butt to put on socks, trim toenails and shave my legs on a stool.

- I resumed massages at 6 weeks—very helpful for working on scar tissue under the incision and getting my muscles working again. I get massages for 90 minutes every 2 weeks. Your therapist should be gentle, but firm and it should not hurt!
- I resumed swimming and hot springs at 6 weeks. Swimming is a miracle! Get thee to a pool! Walking in the water is also a great way to restore your normal walking gait. The water is wonderful because it takes all the weight off the joint.
- I could walk about 1/3 of a mile without the cane by 6 weeks after my right hip and at 10 days after my left hip. On the right side, I did have a limp (slight lurch over the operated leg due to the weak muscles from surgery). This finally subsided at 3 months. I walked without a limp on the left side almost immediately. I was just slightly stiff. I know now that the difference was the cable, which was impeding the function and healing of my muscles on the right side.
- I was not able to increase my walk beyond a mile after the first surgery, because the other hip started to go in my case. I did see a big difference in my pain and strength at 7 months on my right hip. With my left hip, I was able to walk 2 miles by 2 months. But I couldn't do this repeatedly and had to rest and do shorter distances in between longer hikes.

Bottom line: be patient, don't overdo it and support your walk as needed with a cane or hiking poles. It will come back with time and patience, and every hip and every body is different.

- SEX. Everyone wants to know, no one wants to ask... Turns out somebody did a formal study! Here's the YouTube link: <https://www.youtube.com/watch?v=lys45y1iTmQ>. And the low down of what they found out is in the diagram below (blue and arrow symbol = male; pink and mirror/comb symbol = female):



My own experience is you probably won't be interested for the first 3-4 weeks. After that, you can try things that are ok within your restrictions. Use pillows, towels, and other props as needed. Take some Tylenol or ibuprofen about 30 minutes before. Relax. Take it easy, move slowly, and be willing to adjust and try different things. Don't get crazy! You may not be able to support your body weight totally until your leg/hip strengthens, be patient. Here's your chance to be playful and experimental—try some new things! You might like it...

- At 90 days you can resume most of your previous activities, except high impact stuff. Best not to do that to your new hip! You will keep healing for a year.

For those of you getting both hips replaced with some healing time in between, here's my tips for that in between time, excerpted from my blog entry at 7 months after my right hip replacement and 1 month before my left hip replacement:

- I'm achy and stiff when I get up, so I do about 20-30 minutes of gentle yoga, Tai Chi and Qigong. This helps me loosen up. I do squats and some of the Foundation back exercises for strength and range of motion. With this routine, I haven't had to take anything for pain in the morning. I also spend about an hour doing yogic breathwork and energy practices, praying, meditating, and reading spiritual texts.
- During the day, I play Goldilocks. I seek the "just right" amount of sitting, standing, walking, stretching. Mostly, this means I don't do any one thing for very long. I can sit the longest--up to 2 hours. But it helps if I get up every hour and walk and stretch. Standing is limited to 20-30 minutes. I can walk 1/2 to 3/4 of a mile, some days. Other days, a block is all I can manage.
- In the afternoon, I either swim laps for 30 minutes or do an hour of more intense yoga & Tai Chi, PT exercises to strengthen my hips and legs, pilates mat work for my abs/back, and free hand weights for my upper body. Before and after my swims, I spend about 15 minutes in the whirlpool. Great for loosening up and stretching my muscles.
- In the evenings, I have a glass or two of wine and enjoy a nice dinner with Scott. Often times we also include family and friends. We watch positive, uplifting shows or movies. We talk a lot with each other and snuggle. It helps to feel loved and supported by the people around you and to stay to the positive and avoid the negative.
- Towards avoiding the negative, I don't expose myself to news, except for one brief look mid-day to be aware of the latest developments. Often, I then immediately turn it all over to Spirit and pray for what is in the Highest Good for us all.
- I've been striving to eat nutritious, healthy food and to avoid overeating and gaining weight. I seem to have ups and downs with this, but that may be more related to menopause than my hip situation...
- At night is when I have the most problems with pain. At bedtime, I take 2 ibuprofen, a dropper full of CBD oil that doesn't have THC so it doesn't get me high at all and is legal to obtain in all 50 states (here's my source for 1000 mg full

spectrum tincture: <https://www.thecbdistillery.com/>), and I rub CBD salve on both my hips. I'm finding I sleep 1-2 hours at a time before I have to change position. Sometimes I wake up achy in the middle of the night and I rub on more of the salve, usually this is enough to get me back to sleep. If I'm having a really bad night (only happens if I overdo it during the day), I take another 2 ibuprofen. I find the CBD oil has a very soothing, anti-anxiety effect and deepens my sleep. Scott tells me he has noticed a real difference in my sleep since I started taking it.

Tips for cerclage cable removal:

- Cerclage cables are used to support your femur if your surgeon is concerned (or knows) that it has been fractured during placement of your implant. Usually the bones knit around the implant and the fracture heals within 6 weeks to 3 months. Once this healing has occurred, the cable is no longer required.
- Not everyone is bothered by their cable, and surgeons are starting to use less abrasive versions of cables. My surgeon began advocating for kinder and gentler cables after working with me. If you can tolerate your cable, it may not be worth having it removed.
- That being said, if your cable is causing you pain and discomfort, then it is worth removing it. For me, it was a miracle! I write in my blog about all the things that changed within the first 5 days of the cable coming out.
- My one regret is that I didn't do it sooner! Looking back, I could have managed this surgery by 6 weeks after my left hip replacement. That would have put it around the end of June, instead of waiting until the end of October. I would have had a much better summer if I'd have done that.
- This is a very simple surgery compared to a replacement. Mine took about 20 minutes and I was on my way home 2 hours after the surgery. So, recovery is also much faster.
- Because they put you completely under for this surgery, I did all the same pre- and post-op protocols I shared previously.
- Within 5 days I was back to being able to do most of my activities. Within three weeks I was walking over 2 miles and could handle uneven terrain like hills and sand. I had much better energy and less down time with this surgery. At 7 weeks, I completed physical therapy and was more functional than I had been in at least 2 years. At 3 months, I was very nearly fully recovered, even my one-legged yoga poses were almost back to where they had been prior to my hips giving out on me.
- I made videos of what I could do before and after the cerclage cable was removed. You can find them at this link: <https://photos.app.goo.gl/qXWaMSt2tW0TuBJf1>.