

Developmental dysplasia of the hip **Unstable Hips in Babies**

All babies have their hips examined within the first few days of life to check that they feel 'stable'. This leaflet explains about hip problems in babies and what happens if further tests are needed.

The Hip Joint

The hip joint is a 'ball and socket' joint. It is called that because the top of the thigh bone is ball shaped and fits into a dip, or socket, in the pelvic bone. Stable hips have the ball firmly placed in the socket. The joint is held in place by ligaments. When baby's hips are examined they are sometimes found to feel loose or 'unstable'. This will then need further checks to ensure that the hip joint develops properly as the baby grows.



Acetabulum (hip socket)

Femoral Head

Ligament and Joint Capsule

Why do some babies have unstable hips?

Around the time a baby is born the mother's hormones make the ligaments around her joints softer and more elastic. The same hormones can also affect the baby's ligaments, making the hip joint less firm in the socket. In most babies the hips are normal and will become stable during the first few weeks of life.

Sometimes the joint hasn't formed properly so the hip socket (acetabulum) is more shallow than normal, making it easier for the top of the thigh bone to slide out of its place. This is called developmental dysplasia of the hip (DDH). This does not cause your baby any pain but may need treatment to make sure the joint works properly when the baby grows up. Some things can increase a child's chance of having unstable hips such as breech position in pregnancy and family history of baby hip problems. With early treatment for DDH the outlook for normal hip movement and function is very good.





Ultrasound of the Hip

An ultrasound of the hip can help to show if any treatment will be needed or if the hip is now stable. Most babies found to have unstable hips will have an ultrasound at 4 weeks of age. In a few cases it will be decided that as the hip feels very unstable it should be done in the first week of life. *It is important to attend the appointment so there are no delays if your baby does need to start treatment.* If your baby was referred for an ultrasound and you do not receive the appointment or need to change the date please call: 01225 825529

What Happens after the ultrasound?

Based on the result of the ultrasound the radiologist or sonographer (X-ray and ultrasound specialist) will decide what will happen next and let you know the plan at the same appointment:

- The hips may be normal and no further scans or treatments are needed. Your baby will have their hips examined again when they have their normal six to eight week baby check with your GP.
- Your baby may need a **repeat scan** in a few weeks.
- If the hip ultrasound shows that treatment is needed your baby will be referred to a paediatric physiotherapist the same day. The physiotherapist will explain about the treatment plan and apply a hip splint if required. The physiotherapist will also refer to the orthopaedic (bone specialist) doctors when needed.

Hip care

Hips develop best if the legs are allowed to move freely so the baby can bend their knees and keep their legs apart as much as possible. It is advised that babies are not tightly swaddled with their legs straight. It is also best to not leave your baby in car seats or similar for long periods of time. The charity 'Steps' and the International Hip dysplasia Institute have lots more useful information on hip health and swaddling.

Further information

Steps: The UK charity for hip and leg conditions <u>www.steps-charity.org.uk</u> **Helpline 01925 750271**

The international Hip Dysplasia Institute www.hipdysplasia.org

Diagrams reproduced from the International Hip dysplasia institute with their permission

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Please contact the Patient Advice and Liaison Service (PALS) if you require this leaflet in a different format, or would like to feedback your experience of the hospital.

Email ruh-tr.pals@nhs.net or telephone 01225 825656 or 826319