

Hip Labral Repair

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The labrum of the hip helps to seal the ball and socket joint by protecting the lubricating joint fluid in the hip as well as by preventing “micro-motion”. When the labrum tears, the patient may experience pain as a result of abnormal motion in the joint or from the tear itself. Without proper treatment, the increased motion may result in the depletion of the cartilage (arthritis) in the hip (See Figure 1 for diagram). Therefore, in many cases, a torn labrum

requires arthroscopic surgery to ensure a full recovery.

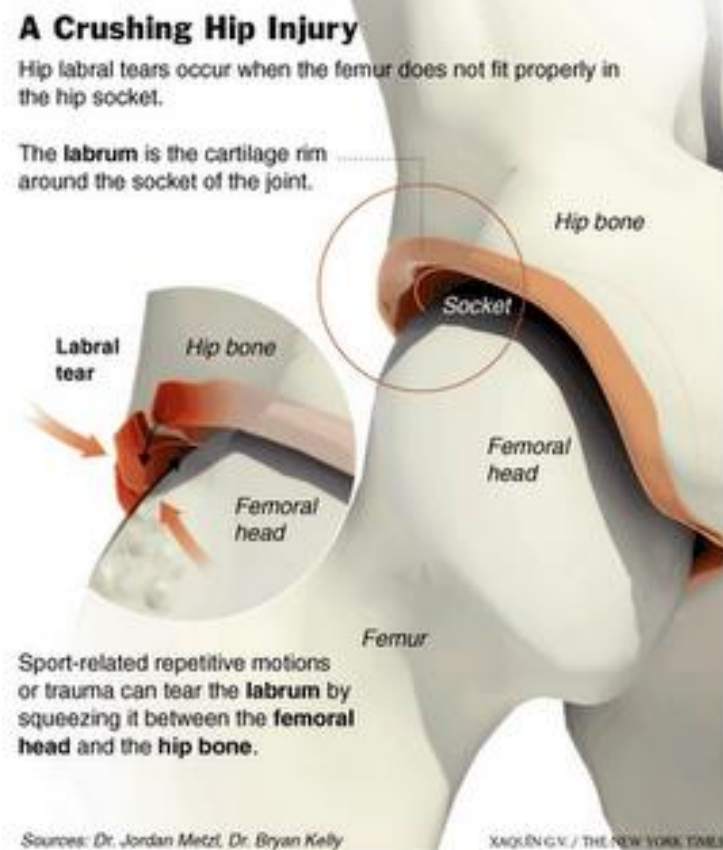
Surgery

Arthroscopic surgery is performed to remove any excess bone (impingement) and ensure the torn labrum is properly repaired. This is done with a series of bone anchors that get buried into the pelvis. The anchors have sutures that are used to repair the labrum back to the bone.

This surgical procedure can take anywhere from 2 to 3 hours and is done as an outpatient. The surgery will involve arthroscopic repair or reconstruction of the

labrum, removing any excess bone from the femur or acetabulum and treatment of inflammation, cartilage lesions, or tendonitis that may accompany the labral tear.

Figure 1-Labral Tear of Hip joint



Recovery

The labrum will take six weeks or longer to heal; however, the recovery period after surgery usually takes about 6 months. The recovery period is segmented into 4 stages. In the first stage, the patient will focus on performing activities that require gentle motion.

Early gentle motion exercises are the key to preventing scar formation and developing a full range of motion. A continuous passive motion machine (CPM) may be used in addition to the stationary bike and physical therapy exercises.

The second phase of recovery and rehabilitation focuses on strengthening the hip, pelvis, and spine. The third phase focuses on sideways and rotational movements and final phase is sport specific recovery to ensure the athlete is ready to return to playing sports.

Return to Work

Patients who perform jobs that are not physically demanding should plan on 2 weeks off of work although they may return sooner depending on how fast they are recovering. In turn, a patient whose job duties involve heavy lifting or a lot of walking, should plan to be out of work for 3 months. Driving may be limited for up to 2-6 weeks after surgery if it is your right leg. Otherwise, most patients can return to driving in 1 week. Accommodations for transportation to and from rehab, appointments, and daily living should be arranged prior to surgery.