

# Home advice and exercises after your periacetabular osteotomy

## WHAT IS A PERIACETABULAR OSTEOTOMY?

A Periacetabular Osteotomy (PAO) is an operation designed to surgically rotate the acetabulum (hip socket) to improve the fit of the femoral head (ball).

This operation is usually carried out for a condition called hip dysplasia in which the hip socket fails to develop properly. The abnormal hip socket is shallow and upwardly sloping. Patients develop pain because of the excessive forces which develop in this shallow socket.

This procedure helps to preserve and protect the hip joint by improving the loading of the hip, thereby relieving pain and instability whilst also preventing early wear and tear.

## WHAT SHOULD I EXPECT AFTER MY OPERATION?

You will be seen by your Physiotherapist the day after your operation to guide you through your post-operative recovery.

You will be taught exercises to do at regular intervals. These will promote your breathing and circulation after anaesthetic, as well as improve hip movement and muscle strength.

You may feel light headed when getting up for the first time. This is to be expected following surgery due to the effects of the anaesthetic, medications, as well as a period of prolonged bed rest. Please do not attempt to get up on your own initially.

You will be taught how to walk with two crutches and climb up and down stairs.

You will have a restriction in the weight you are able to put through your operated leg. Any restrictions identified by your surgeon will be explained to you by your Physiotherapist.

## HYDROTHERAPY

Hydrotherapy is a water based therapy. It can be a very useful form of treatment in addition to your land based physiotherapy program.

Your physiotherapist will discuss if this is suitable for you during your stay.

## EXERCISES FOR YOUR BREATHING AND CIRCULATION

Practice these hourly when you are in hospital, and then whenever you are resting or a minimum of three to four times a day once you are home.

### 1. Deep breathing

- Take three deep breaths and cough to ensure your lungs remain clear



### 2. Ankle pumps

- Move your feet up and down ten times



### 3. Heel slides

- Bend your knees up and down ten times (alternate)



#### 4. Inner range quads

- Tighten your thigh muscles and relax ten times



#### 5. Isometric glutes

- Clench your bottom muscles and relax ten times



#### WALKING

You will be walking with two elbow crutches when you leave hospital. Use the crutches at all times until your consultant advises you that you can walk without them.

For the first few days after leaving hospital, walk as you need to. Take a walk outdoors as soon as possible, and daily thereafter, gradually increasing the time you spend on your feet every day.

#### STAIRS

You will be taught how to climb stairs prior to discharge. Lead with your unoperated leg going up stairs. Lead with your operated leg going down stairs.

#### PAIN AND SWELLING

When you are sitting, sit with your leg elevated.

Apply an ice pack to the affected hip (crushed ice in a plastic bag or a packet of frozen peas) for twenty minutes three to four times a day. Consult your physiotherapist before doing this if you have sensory or circulation problems.

Do not attempt to stand on your operated leg alone.

## INFORMATION FOR PATIENTS

The London Clinic  
20 Devonshire Place  
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[info@thelondonclinic.co.uk](mailto:info@thelondonclinic.co.uk)  
[www.thelondonclinic.co.uk](http://www.thelondonclinic.co.uk)

### **RETURNING TO WORK AND DRIVING**

Your Consultant/Physiotherapist will advise you regarding recommencing these activities, either while you are in hospital or at your first follow up appointment after leaving hospital.

### **OUTPATIENT PHYSIOTHERAPY**

It is recommended that you continue physiotherapy, including hydrotherapy if possible, once you have left hospital. This will be discussed with you by your physiotherapist during your inpatient stay.

For any other information please contact the Physiotherapy department on 0207 616 7651.

### **CONTACT YOUR CONSULTANT OR G.P**

If you have:

- Persistent pain.
- Swelling, oozing or redness around the wound area.
- Fever or high temperature.
- Develop calf pain.

### **FURTHER INFORMATION**

The London Clinic  
Physiotherapy Department  
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## HOME EXERCISE PROGRAMME

To be performed at least three times per day.

### 1. Hip flexion in standing

- Lift your operated thigh forwards and upwards
- Repeat ten times



### 2. Hip extension in standing

- Bring your operated leg backwards, keeping your knee straight
- Do not lean forwards
- Repeat ten times





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### 3. Hip abduction in standing

- Lift your operated leg sideways and bring it back, keeping your trunk straight throughout the exercise
- Repeat ten times



### 4. Hip flexor stretch

- Stand straight
- Bring your operated leg back, placing your toes behind you as far as feels comfortable
- Gently straighten your knee and shift your hips forward so that you feel a stretch in the front of your thigh
- Hold for 30 seconds and repeat three times



## 5. Prone lie

- Lie on your tummy, to feel a stretch in the front of your thigh
- Spend more time in this position each day as comfort allows



## POST-OPERATIVE EXERCISES TO BEGIN AT WEEK FOUR

Add these exercises as an addition to your current program at four weeks from the date of your surgery.

## 6. Hip stretch into flexion

- Bend the knee of your operated leg up towards your chest, to where it starts to feel uncomfortable
- Support your leg with two hands to assist the stretch and hold for ten seconds
- Repeat ten times



## 7. Straight leg raise

- Lying on your back, lift your operated leg up about 45 cms off the couch/bed and hold for five seconds
- Repeat ten times



## 8. Hip abduction in side lying

- Lying on your un-operated side (don't roll forwards or backwards), keep your operated leg completely straight and raise about 30 cms from the resting position
- Hold for ten seconds and repeat ten times



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