

Osteoarthritis, or “wear and tear” of the hip joint occurs when there is a loss of cartilage in the joint, re-modeling of adjacent bone and associated inflammation. The biggest symptoms are pain and decreased function. An x-ray can help determine the level of osteoarthritis in the joint, but the findings of these can very often not match with the symptoms. That is, you can have a very sore joint having a big impact on your lifestyle with minimal changes on x-ray. Similarly you can have large changes on an x-ray seemingly causing you very few problems. This is why a thorough examination of the patient, including a full history and discussion of your pain and limitations, is so important.

Osteoarthritis does not necessarily get worse and can often be managed without the need for surgery. Treatments include the use of walking aids ([link to walking aids section](#)), pain relieving drugs, weight loss, physiotherapy and exercise and finally, surgery to replace the joint.

A total hip replacement usually involves the complete replacement of worn joint surfaces of the hip joint with a new ball and socket joint. A hip resurfacing operation literally replaces the surfaces that are worn away. Success of resurfacing to some degree depends on the quality of your bone and how badly your hip is damaged, thus it is not suitable for all patients. There are several different types of artificial hips including metal, plastic and ceramic components. These options will be discussed with you if you require a hip replacement.

Exercises for the osteoarthritic hip may also be used post-surgery for rehabilitation following a hip replacement.

[Click here to see a printable sheet of exercises for the arthritic hip.](#)

NICE guidelines OA (2015)