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Hip-checking long recoveries

New procedure has hip-replacement patients out of hospitals quicker

By Jim Kehl

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For a while, arthritis symptoms had only been an intermittent bother for Ruth Sletten, an avid golfer, but the last straw occurred last summer when hip pain started taking a toll on the 62-year-old's game.

So, Sletten, a Centennial resident, contacted orthopedic surgeon Dr. Craig Loucks, and on Jan. 18 she underwent a relatively new, minimally invasive total hip replacement procedure at Centennial Medical Plaza.

"I decided I wanted to do it when I was young enough to rehabilitate quickly and enjoy it," Sletten said.

Two days after surgery, she was climbing stairs, and five weeks later, she returned to the golf course, stronger than before.

"My game is better," she said. "I was restricted a little bit without realizing it because of the pain. Now I can swing at full strength."

By any means, hip replacement is not new, but traditional surgical procedures generally require a 12-inch incision along the hip and thigh, with extensive cutting of muscle and tendons to get at the damaged hip joint.

These procedures also required a week's stay in the hospital and months of physical therapy.

But recently, some U.S. surgeons have started using a newer procedure that requires only a 3-inch incision and no cutting of muscle or tendon. Patients suffer less tissue damage, blood loss and scarring resulting in much shorter hospital stays and recovery times. There is also a theoretical lower risk of future dislocations of the components, experts say. But most notable, recovery time drops from six months to six-to-eight weeks.

Sletten has a friend who coincidentally had a traditional hip replacement



By Patrick Kelley/Aurora Daily Sun & Sentinel

Using a surgical saw, Greenhow cuts sections of Gordon's upper left femur to remove and replace with an artificial hip.



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Making sure: After installing the components of the hip socket, Dr. Robert Greenhow, right, and Brad Dussault check to ensure that Stan Gordon's hips are properly aligned after a March 30 hip replacement procedure at Centennial Medical Center.

surgery on the same day she did, and the two friends tracked each other's progress.

"Six weeks out, I was so far ahead," Sletten said. "She was still using a walker and had not dared to drive. I was driving in two weeks."

Loucks and his partner, Dr. Rob Greenhow, are two of only three surgeons who perform the procedure in Colorado.

Nationwide there are still only a handful that do it, although European surgeons have been attempting it for years.

Loucks and Greenhow, both Canadians, were exposed to the procedure while training in Vancouver.

"Nationwide, surgeons just didn't pick up on it," Loucks said.

Two reasons could be the high cost of retraining surgeons and the specialized equipment needed, he said.

For starters, the procedure requires a custom-built, \$150,000 surgical table that allows a patient's leg to be manipulated in such a way that a surgeon can gain access to the joint through a 3-inch incision. In fact, at some points during the surgery, when the hip joint has been completely separated, the surgeon must contort the patient's leg in ways that would be impossible under normal circumstances.

The table also allows surgeons to pass the detached hip and metal replacement between muscles and tendons, obviating the need to cut through them.

Loucks also said the procedure requires extra training, and many surgeons schooled in older methods find it simpler to continue with the conventional procedure.

Ultimately, the result of the new and old procedures is the same: 100 percent recovery. Artificial hips function exactly like natural hips, and patients who undergo the procedure often can return to almost any activity they enjoyed before; but the problem with traditional procedures is the lengthy recovery time, Greenhow said.

"We've had people who have been putting it off for years because they couldn't bear the thought of taking so much time off work," he said.

The two surgeons have had people taking their first steps one day after the surgery, Greenhow said.

For Sletten, the only evidence of her surgery is a small, fading scar, she said. Her recovery is becoming a faded memory as well.

"I did walk a little slowly and gingerly, but now, two months out, I'm on the treadmill an hour a day and lift weights," she said.

