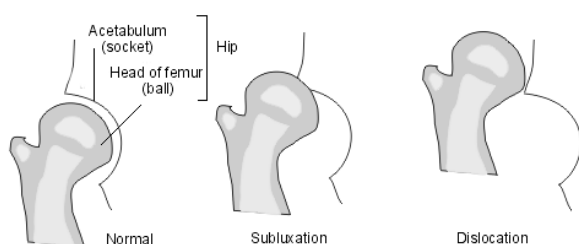


Referring your baby to the Hip Clinic

The midwife or doctor who carried out your baby's routine newborn examination will have discussed with you the need for your baby to be referred to the hip screening clinic. This leaflet has been designed to provide you with information that may help to answer your questions. If you require any further information please do not hesitate to ask your midwife.

Why has my baby been referred to the hip screening clinic?

Your baby's hips are checked as part of the 'newborn baby check' carried out routinely within 72 hours of birth. Your baby will have been laid on his or her back and their legs moved gently outwards to check if a click could be felt (not heard). The top of the bone in the leg (femur) usually fits snugly into the socket of the pelvis (acetabulum). They are usually in close contact (like an egg in an egg cup). This is necessary for normal development to occur.



Sometimes, the top of the leg bone slides above and behind the socket so that there is no contact; this is known as dislocation. If there is some contact this is referred to as subluxation. If the leg bone is sometimes in the socket of the pelvis, but not always this is referred to as an unstable hip joint. 'Clicky hips' is another term used which

means that the hip joint is loose and may remain this way for up to two weeks after birth but resolves spontaneously. The reason for this is that one of the normal hormones of pregnancy (relaxin) has relaxed the ligaments to make childbirth easier.

Collectively these conditions are known as Developmental Dysplasia of the Hip (DDH). Hip dysplasia that requires treatment occurs in 2-3 children per thousand and is four times more common in girls than boys¹. There is nothing that you could have done, or not done, during pregnancy to prevent these conditions. The sooner any of these conditions are identified, the more likely any treatment needed will be successful. If treatment is delayed any condition may become more complex. If treatment is delayed beyond two years, it is possible that the hip joint and movement of the joint when walking will become painful.

Reasons for referral

Some babies need an urgent appointment made to the Hip Screening Clinic: if during the examination it was discovered that

your baby has a dislocated hip/hips, if they are unstable or dislocatable and if movement of the legs was limited.

Routine referrals to the Hip Clinic are made for babies who have clicky hip/s, were born in the breech position (born above 34 weeks gestation), or if there is a family history of DDH or hip problems in early childhood. In multiple birth (e.g. twins, triplets) if one baby is referred the other/s will be referred also. Other reasons for referral are sometimes made that do not fall into one of these categories; however, this will be fully discussed with you during the examination.

What happens next?

If your baby has been urgently referred then you will either be seen by a specialist (paediatric doctor, nurse specialising in orthopaedics or consultant orthopaedic surgeon) prior to discharge home or alternatively at the infant Hip Clinic within a week.

If the referral is routine then you should receive an appointment to bring your baby to the Hip Clinic within 8 weeks. Babies who are born in the breech position are usually seen within 10-12 weeks from the date of referral.

If you do not receive an appointment by this time please contact The CAT 5 team on 0118 322 7415.

What will happen at the Hip Clinic?

Infant hip clinics are usually held on Wednesdays, and the 1st and 3rd Monday mornings in the children's clinic at the Royal Berkshire Hospital, and on the second and the fourth Tuesday afternoons in the month at the West Berkshire Community Hospital. There is also a clinic at the Royal Berkshire Bracknell Clinic on

the second and fourth Monday mornings of the month.

Your baby will be re-examined by a doctor or nurse specialising in DDH and may need to have an ultrasound on the hip joint. At this appointment the staff will discuss this with you. Your baby may need to be seen again and if this is the case a follow up appointment will be made.

Depending on the severity of the condition your baby may need to wear a hip splint or pavlik harness but this will be discussed with you at the clinic.

Your baby will have their hips routinely checked at the 6-8 week check-up, and at 2 years old.

Further information

This can be found on the following websites:

- <http://www.hipdysplasia.org>
- <http://www.nct.org.uk/parenting/hip-dysplasia-babies>

References

1. www.hipdysplasia.org

This document can be made available in other languages and formats upon request.

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