



Bòrd SSN nan Eilean Siar
NHS Western Isles

Physiotherapy Department

Hip Osteoarthritis



An Information Guide for Patients and Carers

Contents

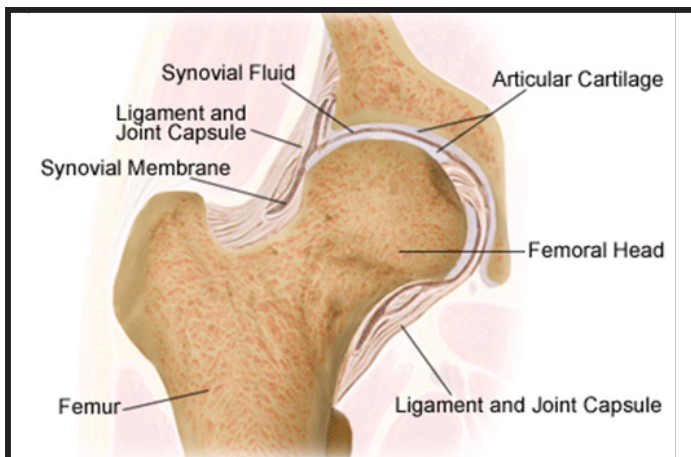
Section 1: What is osteoarthritis?	3
Contributing factors to osteoarthritis	
Section 2: Diagnosis and symptoms	5
Symptoms	
Diagnosis	
Flare up of symptoms	
Section 3: Gentle hip exercises for flare ups	7
Section 4: Living with osteoarthritis	8
How with osteoarthritis affect me?	
What you can do to help yourself	
Section 5: Range of movement exercises	9
Section 6: Strengthening exercises	10
Other forms of exercise	
Section 7: Other treatments	12
Surgery	
Section 8: Local groups and activities	14

What is osteoarthritis?

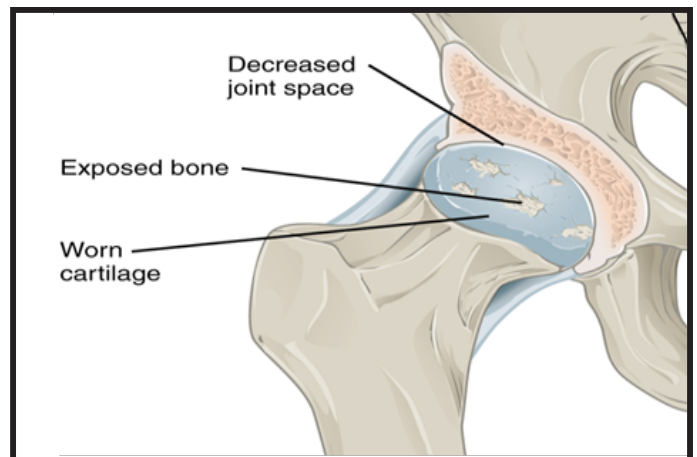
This booklet is designed to give you some useful information following your diagnosis of hip osteoarthritis.

Osteoarthritis is a very common condition which can affect any joint causing pain, and stiffness. It's most likely to affect the joints that bear most of our weight, such as the hips, as they have to take significant stresses, twists and turns, therefore osteoarthritis of the hip is very common and can affect either one or both hips.

A normal hip joint



A hip joint with mild osteoarthritis



In a healthy joint, a coating of smooth and slippery tissue, called cartilage, covers the surface of the bones and helps the bones to move freely against each other. When a joint develops osteoarthritis, the bones lose their smooth surfaces and they become rougher and the cartilage thins. The repair process of the cartilage is sometimes not sufficient as we age.

Almost all of us will develop osteoarthritis in some of our joints as we get older, though we may not even be aware of it. Often the joint will continue to work normally and without any pain or stiffness.

However, there may come a point when the repair processes don't always work so well and changes to the joint structure can sometimes cause you to experience symptoms such as pain, or difficulty in moving your hip normally.

Extra bone may form at the edge of the joint. These bony growths are called osteophytes and can sometimes restrict movement or rub against other tissues.

Contributing factors to osteoarthritis

Factors that may contribute in the development of osteoarthritis include:

- Age:** Osteoarthritis becomes more common with increasing age. By age of 65 at least half of people will have some osteoarthritis in some joints.
- Gender:** Osteoarthritis is more common in women than men.
- Obesity:** Mechanically, obesity increases the pressure on joints that carry the load of the body. Fat also releases many molecules that can cause an increase in inflammation which can affect the joints.
- Genetic factors:** The genes we inherit can affect the development of osteoarthritis if your parents, brothers or sister have it.
- Other:** Normal activity and exercise don't cause osteoarthritis, but very hard, repetitive activity or physically demanding jobs can increase your risk.

Diagnosis and symptoms

Symptoms

Symptoms of hip osteoarthritis can include:

- pain mostly felt deep at the front of your groin or thigh, this can also radiate out to the buttocks or knee
- there may be restriction in the movement of the hip joint and you may experience a crackling sensation as you move it
- sometimes the muscles around the joint may look thin or wasted
- increased stiffness when you have not moved your joints for a while
- if you have severe osteoarthritis, you may find some of your daily activities more difficult; such as stairs, putting on socks or shoes, crossing your legs, bending and walking
- you may find that your sore leg appears a little shorter than other and potentially limp
- more severe osteoarthritis can also make it difficult to sleep.

You may experience some or all of these symptoms and your symptoms may vary for no apparent reason from bad spells to better periods.

Diagnosis

The diagnosis of osteoarthritis is usually based on assessment of the following symptoms:

- how and when they started
- how they've developed
- how they affect your life
- any factors that make them better or worse
- how they react to physical examination of the hip joint.

X-rays will show degenerative changes in most people over the age of 40. Your symptoms will be the deciding factor in diagnosing osteoarthritis.

Your doctor may refer you to a specialist if help is needed to manage your osteoarthritis. This might be for physiotherapy or occupational therapy, which can help if you're having difficulty with everyday activities.

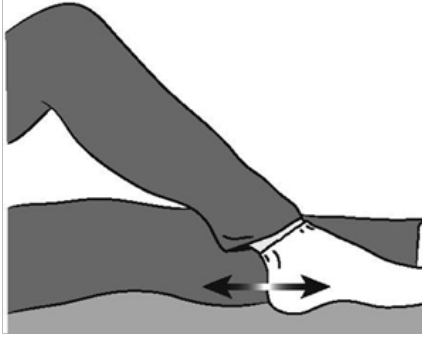
If your arthritis becomes severe and is causing long-term problems, your GP may refer you to an orthopaedic surgeon.

Flare up of symptoms

If you are experiencing a flare up of your symptoms:

- keep your hip moving so it doesn't stiffen up
- manage your pain well by taking regular pain relief
- carry out gentle exercises to keep the thigh muscles working to help prevent the muscles from weakening.

Gentle hip exercises for flare ups



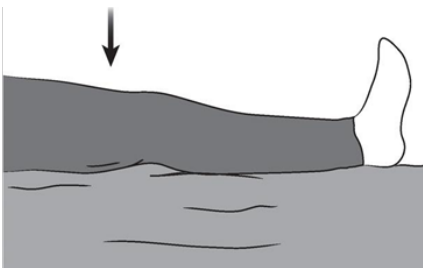
1. Hip Flexion

- Lie on your back.
- Bend and straighten your hip and knee by moving your foot up and down.
- Repeat 10 times.



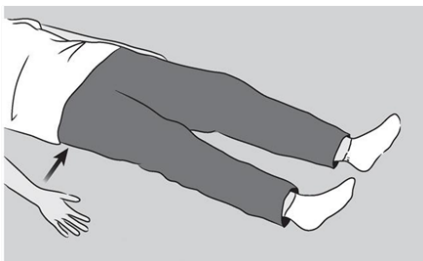
2. Hip Abduction

- Lie on your back.
- Squeeze your buttock muscles.
- Bring your leg to the side and then back to mid position.
- Repeat 10 times.



3. Static Quads

- Lie flat on the floor or a bed, keeping your legs straight.
- Pull your toes towards you, while pressing your knee towards the floor or bed. Hold for 5 seconds and relax.
- Repeat 10 times.



4. Gluteal Squeezes

- Lie on your back and squeeze buttocks firmly together. Hold for approximately 5 seconds. Relax.
- Repeat 10 times.

Gradually build up the exercises as you are able. Either hold the exercise for longer or increase the number of repetitions.

During a flare up, if you are struggling with gentle walking you could try walking in the swimming pool, or some gentle cycling on an exercise bike.

Living with osteoarthritis

How will osteoarthritis affect me?

Osteoarthritis affects different people, in different ways. For most people, osteoarthritis does not continue to get steadily worse over time.

For some people, the condition reaches a peak a few years after the symptoms start and then it remains the same or may even improve. Others may find they have several phases of moderate joint pain with improvements in between.

The degree of damage to a joint isn't very helpful in predicting how much pain you'll have. Some people have a lot of pain and mobility problems from a small amount of damage, while others have a lot of damage to the joint but few or no symptoms.

What you can do to help yourself

Although there's no cure for osteoarthritis, there are many things you can do to manage your symptoms and allow you to get on with your life.

Reduce stress on your hip joints

- If you're overweight, then losing even a small amount of weight can make a big difference to your symptoms
- Pace your activities – avoid doing too much in one day especially physical jobs
- Wear footwear with cushioned soles or insoles
- Keep joints moving – avoid being in one position for too long to prevent your hip becoming stiff
- Use a walking stick to off load the weight going through your hip.

Exercise

Many people worry that exercising will increase their pain and cause further joint damage. However, while resting painful joints may make them feel more comfortable at first, too much rest can increase stiffness. It is important to find the right balance between rest and exercise.

Range of movement exercises

The following exercises involve taking joints through a range of movement which should feel comfortable, with the aim to smoothly and gently ease them just a little bit further.

Range of movement exercises

1. Hip Extension



- Stand straight holding on to a chair.
- Bring your leg backwards keeping your knee straight. Do not lean forwards.
- Repeat 10 times.

2. Hip Abduction



- Stand straight holding on to a support.
- Squeeze your buttock muscles.
- Lift your leg sideways and bring it back keeping your trunk straight throughout the exercise.
- Repeat 10 times.

3. Hip Flexion

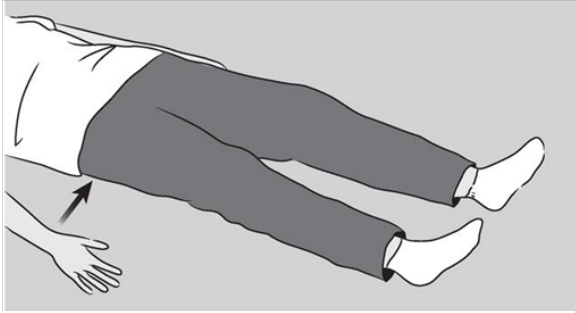


- Stand straight holding on to a support.
- Lift your knee up as far as is comfortable. Gently lower back down
- Repeat 10 times.

Strengthening exercises

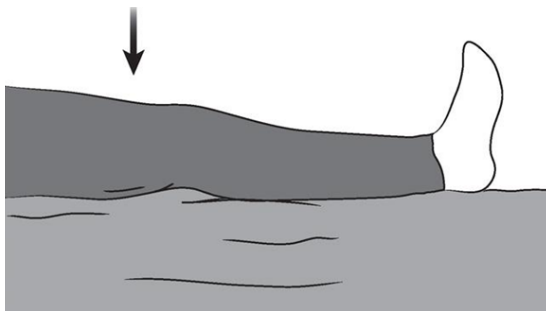
Your buttock muscles (gluteals) can weaken as a result of osteoarthritis. Weak muscles put more pressure through your hip joint. The following exercises are performed against some form of resistance to strengthen the muscles that move and support your joints.

1. Gluteal Sets



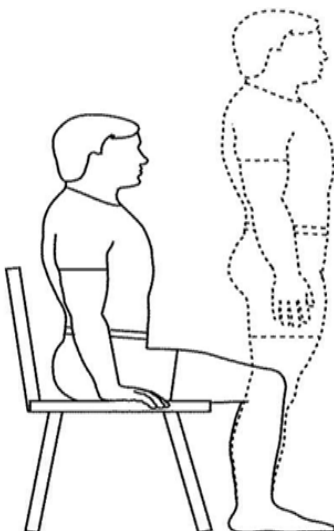
- Lying on your back, squeeze buttocks firmly together. Hold for approximately 5 seconds and then relax.
- Repeat 10 times.

2. Static Quads



- Lie flat on the floor or a bed keeping your legs straight.
- Pull your toes towards you, while pressing your knee towards the floor or bed. Hold for 5 seconds and relax.
- Repeat 10 times.

3. Sit to Stand



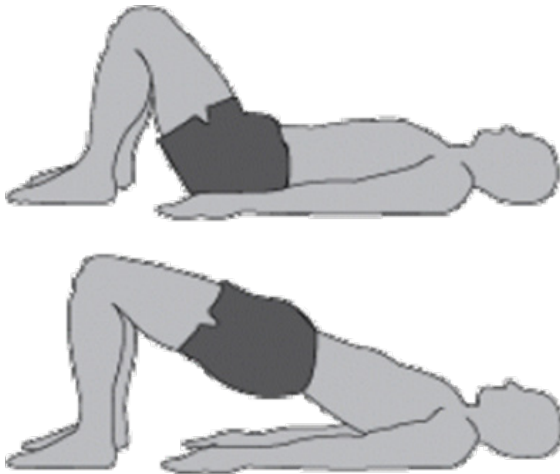
- Sit with your arms crossed.
- Stand up and then sit down slowly on a chair. (Note. this can be made easier and more difficult by changing the height of the chair).
- Repeat 10 times.

4. Step Ups



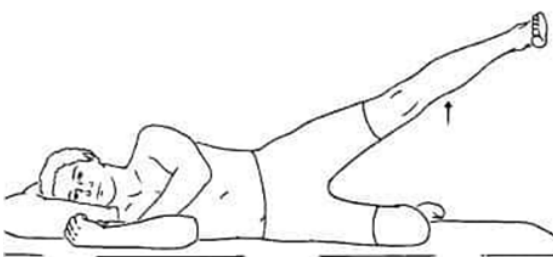
- Stand in front of a step.
- Step up 10 times with one leg leading and then repeat with the other leg leading.

5. Bridging



- Lie on your back with knees bent and feet on the floor.
- Lift your pelvis and lower back (gradually vertebra by vertebra) off the floor. Hold the position for 5 seconds. Lower down slowly returning to starting position.
- Repeat 10 times.

6. Hip Abduction



- Lie on your side supporting yourself on your elbow. Roll your top hip slightly forward, use top arm to support yourself in front.
- Keeping top leg straight lift it up towards the ceiling. Make sure the leg stays in line with your body and toes point forwards.
- Repeat 10 times.

You shouldn't be afraid to use your joints. If pain makes it difficult to get started with exercise, you could try taking a painkiller.

Other forms of exercise

Physical activity that raises your heart rate and gets you breathing more heavily is also encouraged. This type of exercise burns off calories, so it can help if you need to lose a bit of weight. It can also improve your sleep and help to reduce pain.

Examples include:

- walking, cycling and swimming are all excellent forms of exercise for people with arthritis
- you could also try an exercise bike or cross-trainer
- walking laps in the shallow end of a swimming pool is also great for strengthening leg muscles.

The most important thing is to start gently and build up gradually.

Local sport/leisure centres also run a variety of exercises classes that may be suitable and enjoyable. This is also a good way to introduce yourself to exercise, especially if you have not done any for some time.

Other Treatments

Useful aids and adaptations

There are aids and adaptations available to help you around the home, and some fairly simple changes can make a big difference and reduce the strain on your joints during your everyday activities. If you're not sure what's available or how you might be able to reduce the strain on your joints, an Occupational Therapist will be able to advise you by emailing them at: wi.otwesternisles@nhs.scot

As osteoarthritis is a long-term condition, it's important you receive support to help you cope with any issues such as reduced mobility and exercise. If you feel you need additional support other than the exercises in this booklet, you can self-refer to Physiotherapy via our website www.wihb.scot.nhs.uk/physiotherapy (and click on 'Self Referral' link). In a small number of cases, where the previously mentioned treatments haven't helped or the damage to the joints is particularly severe, surgery may be carried out to repair, strengthen or replace a damaged joint.

Surgery

You won't necessarily need a hip replacement if you have osteoarthritis of your hip. Other measures should be trialled first such as exercises at home, physiotherapy

and occupational therapy and taking regular pain relief. If your pain is manageable and you don't require much medication, or you are able to manage your symptoms effectively, then you should consider continuing with exercises and leaving surgery to a later date.

If you require surgery it is important to strengthen your muscles as much as possible, as this will aid your recovery post op. It is worth noting that 5-10% of patients who have hip replacement surgery are not satisfied with their result.

Risks of surgery

As with any procedures, this carries some risks and complications.

Pain: Your hip will be sore after the operation. Pain should improve with time. You may experience pain as a result of complications listed below. Some hips can remain painful after the replacement.



Knee stiffness: Can occur after the operation, especially if the hip is stiff beforehand. If you don't do your exercises your hip can become stiff. If the stiffness doesn't improve, you may require manipulation of the joint (under anaesthetic)


Bleeding: Some patients may occasionally need a blood transfusion or iron tablets. Occasionally the bleeding may form a blood clot or large bruise within the hip.

DVT: DVT (deep vein thrombosis) is a blood clot in a vein. The risk of developing a DVT is greater after any operation. Your surgeon may give you medication to try and limit the risk of DVTs forming. You will be asked to wear stockings on your legs.

Infection: The wound site may become red, hot and painful. There may also be a discharge of fluid or pus. It is usually treated with antibiotics. More serious infections can lead to sepsis.

Local groups and activities

Group	Activities offered	Contact
<p>Hebrides Dance & Wellbeing Studio Stornoway</p> 	<p>Offers over 50s classes to improve fitness, co-ordination, balance, muscle tone and overall wellbeing.</p> <p>Gentle Pilates</p> <p>Balanced Body - Gentle standing class using barre for balance to work on posture, strength, flexibility, balance and co-ordination</p> <p>Groovy Movers - A dance class for Over 50's</p> <p>Zumba Gold - Low impact version of Zumba - all the shimming and shaking but at a slightly less intense pace. It's low impact so no jumping, and you can take all the moves at your own level. No need for co-ordination - everyone welcome.</p>	<p>Kirstie Anderson Tel. 07715 499552</p> <p>Email: kirstie.anderson@gmail.com</p>
<p>Move More Western Isles</p> 	<p>Keep active, keep well! This class helps keep your heart and lungs healthy, improves balance and strengthens bones and muscles.</p> <p>Offers easy exercises that you can also do at home, good music, a bit of fun and a warm welcome. Move More Western Isles activities aim to have something for everyone (<i>depending on area</i>) including:</p> <ul style="list-style-type: none"> • Gentle Movement Classes • Supported Introduction to Gym Facilities • Easy Aqua • Mobility, Balance and Heart Health Classes • Group Walking • Gardening 	<p>Lewis & Harris Kirsty Wade Tel: (01851) 822 761 or 822800 Email: kirsty.wade@cne-siar.gov.uk</p> <p>Uists Kevin Morrison Tel: (01870) 604 359 Email: kevin.morrison@cne-siar.gov.uk</p> <p>Barra Lisanne Macinnes Tel: (01871) 810 129 Email: lisanne.macinnes@cne-siar.gov.uk</p>

Group	Activities offered	Contact
<p>Aquafit</p>	<p>A fun filled water based aerobic class combining muscular strength and endurance exercises.</p> <p>Great for anyone with joint or muscular problems. Suitable for all ages and levels of fitness.</p>	<p>Ionad Spòrs Leòdhais Stornoway Tel: 01851 822800 Email: isladminteam@cne-siar.gov.uk</p> <p>Isle of Harris Sports Centre Tarbert Tel: 01859 502970 Email: harrissport@gnes.net</p>
<p>Slainte Mhath Scheme</p> 	<p>The 'Slàinte Mhath' ('Good Health') initiative is a Council funded-scheme designed to encourage the use of Sports Centres from the Butt to Barra.</p>	<p>Stornoway: Ionad Spòrs Leòdhais Tel: 01851 822800 Email: isladminteam@cne-siar.gov.uk</p> <p>Shawbost: Shawbost Swimming Pool Tel: 01851 822879</p> <p>Lionel: Lionel Swimming Pool Tel: 01851 810208</p> <p>Tarbert: Isle of Harris Sports Centre Tel: 01859 502970 Email: harrissport@gnes.net</p> <p>Benbecula: Sgoil Lionacleit Sport Centre Tel: 01870 603693 Email: LionacleitSportsCentre@cne-siar.gov.uk</p> <p>Castlebay: Castlebay Sports Centre Tel: 01871 810129</p>

Further Information

If you require further information, please contact:

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We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website: www.wihb.scot.nhs.uk/feedback or share your story at: www.careopinion.org.uk or 0800 122 31 35
- Tel. 01851 704704 (ext 2236) or 0797 770 8701 Monday-Friday 10am-4pm (answerphone available).

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