

MERCY Advances

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Recovery faster and easier...

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RECOVERY FASTER AND
EASIER ON PATIENTS...

Minimally invasive hip replacement surgery

With new technology, expanded knowledge and high-tech equipment, many types of orthopedic surgeries are becoming less invasive and providing better results.

New ways of thinking have brought about sweeping changes in the operating room — and nowhere is this more evident than in new, minimally invasive hip replacement surgery.

Hip replacement surgery has long been thought of as a remedy of last-resort for painful and debilitating conditions. But, a new way of performing hip replacement is less invasive — providing faster and easier recovery for the patient.

“This is a real breakthrough in how hip replacement is performed,” said James Grimes, M.D., about the new “anterior” approach to the surgery.

With the “anterior” approach, the surgeon accesses the hip joint from the front, instead of the rear or the side. Using this approach, the surgeon does not have to detach muscle from the femur as is done in a conventional hip replacement surgery. Instead, the

surgical team replaces the problem hip through a natural gap between muscles.

The gluteal muscles that attach to the pelvis and femur — the most important muscles for hip function — are not disturbed. The result is that the patient recovers more quickly and movement is not limited after surgery. Unlike conventional hip replacement surgery, there is immediate stability in the hip and a low risk of dislocation.

“This is the only type of hip replacement surgery that does not require detaching any muscle from the bone,” said Dr. Grimes. “It makes a tremendous difference in the recovery and healing process.”

One element of the surgery is a special operating table, now at Mercy Hospital. The table enables the surgical team to precisely control the position of the patient’s lower extremities. With conventional hip replacement, the patient’s leg would be free and the surgical assistant would manipulate it during the surgery. Using the new table, the leg is controlled mechanically and can be rotated, angled and elevated to give the surgeon accurate positioning.

Dr. Grimes, a Bakersfield orthopedic surgeon, received training from Joel Matta, M.D., an internationally known expert in hip and pelvic reconstructive surgery. Dr. Matta is one of the leaders in developing the new technique and is a co-developer of the OSI PROfx operating table.

The incision for the surgery is about three and a half inches, but may vary according to the patient’s body size. The incision for conventional hip replacement could be as long as 12 inches. However, Dr. Grimes noted that it is not the reduced size of the incision

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invasive.

“The most commonly used ‘mini-incision’ for hip replacement accesses the joint posteriorly—this approach requires division of six muscles. This is a faster and easier approach for the surgeon. Although an improvement over standard techniques, it is basically a standard surgical approach using a smaller skin incision,” according to Dr. Grimes.

“There is another type of hip replacement that uses two small incisions, but this still causes damage to the soft tissue under the skin. The implant is passed through an incision in the hip abductor muscles thereby damaging them. A small incision is desirable, but it is what happens under the skin that is really important to the success of the surgery and the patient’s recovery,” said Dr. Grimes.

“The anterior single incision hip replacement is truly minimally invasive. I