



**University
Hospitals Sussex**
NHS Foundation Trust

Hip fracture

Accident and emergency

Patient information

What is a hip fracture?

You have broken the top part of your thigh bone (femur), near the hip joint.

The hip joint is a ball-and-socket joint where the thigh bone meets the pelvis. A hip fracture is often called a 'neck of femur fracture'. Both terms mean the same thing.

Our goal is to help you recover quickly and safely. We also want to keep you as comfortable as possible, so please let us know if you are in pain.

You will likely need surgery to repair the break.

What will happen when I get to hospital?

The team will:

- Assess your injury.
- Do tests to confirm the diagnosis.
- Manage your pain and help keep you comfortable.

Common tests

- **Hip X-ray:** to check for a break. If the break is hard to see, we may arrange a CT or MRI scan.
- **Chest X-ray:** to look for infections that may have caused a fall.
- **Electrocardiogram (ECG):** to check how well your heart is working.

Pain relief

Hip fractures are painful, so we will give you painkillers such as:

- Paracetamol
- Codeine
- Morphine (if needed).

We may also give you a nerve block injection in your groin.

This numbs the leg by blocking the nerves that carry pain. It may make it harder to move your leg, but this wears off in 8–12 hours.

Other care

- You may need a catheter to help you pass urine.
- We will tell you when to stop eating before surgery.
- You will receive fluids through a drip to stay hydrated.

How do we fix a hip fracture?

You will likely need surgery to repair the break.

We usually aim to operate within one or two days, unless other medical conditions need to be treated first.

The goals of surgery are to:

- help you stand, walk, and put weight on your leg again
- reduce your pain and discomfort.

Possible risks

Like any operation, hip surgery carries some risks, including:

- Infection
- Bleeding
- Blood clots
- Dislocation
- Confusion (delirium)
- Constipation
- Chest infections
- Pressure sores
- Reduced independence
- An increased risk of dying (especially in older or frail patients).

Your surgeon will explain the risks to you. We will do everything we can to reduce them.

Are there alternatives to surgery?

We cannot mend your hip without an operation. The hip bone will not heal properly on its own.

Without surgery:

- You will not be able to walk on the injured leg for many weeks.
- You may experience ongoing pain.
- You would likely remain in bed, which increases the risk of:
 - Chest infections
 - Pressure sores.

We would only avoid surgery if it is too risky for your overall health. This decision would be made carefully by your surgeon.

Consent for surgery

Before surgery, we must get your written consent.

Staff will:

- Explain the procedure
- Go over the risks and benefits
- Discuss any alternatives.

If anything is unclear or you are unsure, please ask a senior member of staff for more information. We are here to help you understand your treatment fully.

Support

For general medical advice please use the NHS website, the NHS 111 service, walk-in-centres, or your GP.

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- The NHS website www.nhs.uk provides online health information and guidance.
- There are walk-in and urgent treatment services at Brighton Station, Crawley Urgent Treatment Centre, Lewes Victoria Hospital, Horsham Minor Injuries Unit and Bognor Regis War Memorial Hospital.

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