

Overview

- This leaflet is designed to advise people who have suffered a hip fracture (a broken hip).
- Our main aim is to help you recover from your broken hip as quickly and safely as possible. We aim to keep you as comfortable as possible, so please let us know if you are in any pain.
- A team of specialists will see you on your journey through the hospital and ensure you are safe to be discharged. This includes staff in the emergency department, anaesthetic doctors who will manage your pain relief and safety during your operation, orthopaedic surgeons who will operate on you to fix your broken hip, physiotherapists, occupational therapists and medical doctors, who will ensure your recovery after the operation allows you to be as independent and safe as possible.
- If you have any questions or concerns, please let our staff know.

Support

- For general medical advice please use the NHS website, the NHS 111 service, walk-in-centres, or your GP.
- The **NHS** website provides online health information and guidance www.nhs.uk
- The **NHS 111** phone line offers medical help and advice from trained advisers supported by nurses and paramedics. Available 24 hours a day. Calls are free from landlines and mobile phones.
- There are **walk-in and urgent treatment services** at Brighton Station, in Crawley and at Lewes Victoria Hospital. www.bsuh.nhs.uk/services/ae/
- **Patient Advice and Liaison Service (PALS)** can be contacted with your comments and concerns, and to provide general support. PALS@bsuh.nhs.uk
RSCH: 01273 664683.
PRH: 01444 448678
PALS, Royal Sussex County Hospital,
Eastern Road, Brighton BN2 5BE

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Disclaimer: The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

Ref number: 917
Publication Date: May 2019
Review Date: May 2021

Hip fracture

Advice for patients seen in the Emergency Department

Emergency Department

Royal Sussex County Hospital
Level 5, Thomas Kemp Tower,
Eastern Road, Brighton BN2 5BE
01273 696955 extn. 64261

Princess Royal Hospital
Lewes Road, Haywards Heath RH16 4EX
01444 448745

www.bsuh.nhs.uk



Your broken hip

- Unfortunately, you have sustained a fracture (break) of your hip.
- Your hip joint is a ball and socket joint that sits between your pelvis and your thigh bone (femur). A hip fracture is a break at the top of your thigh bone. It is also known as a neck of femur fracture.
- Both of these terms describe a range of different fractures at the top of your femur. It is likely you will need an operation to repair the fracture.

In the Emergency Department

- The staff in the Emergency Department will assess you by doing some basic investigations to diagnose your broken hip. They will also treat your pain and make you more comfortable.
- **Hip x-ray** - An x-ray allows the doctors to confirm that your bone is broken. Sometimes it can be difficult to see a small fracture on an x-ray image. If there is any doubt, we may arrange for you to have a CT or MRI scan as well.
- **Chest x-ray** - People often break their hip because of a fall. A chest x-ray allows us to see if you have a chest infection that may have caused this.
- **Electrocardiogram (ECG)** - This shows us how well your heart is working.

- **Pain relief (analgesia)** – Broken hips are painful so we will offer you painkillers such as paracetamol or codeine, and we may also offer you morphine. It is important to us that you are not in pain, so please tell us if you are uncomfortable when you are moving or lying still.
- We will offer you an injection in the groin for the pain called a **nerve block**. This is a local anaesthetic which we inject around the nerves supplying your leg. This will numb your leg but also make it difficult to move it. The numbness will wear off in about 8-12 hours and should not be a problem as you will not be able to walk on your injured leg before the operation.
- We may insert a **catheter** to ensure you are passing urine. We will also advise you **when to stop eating** before your operation and we will then give you fluids via a drip.

Operating on a hip fracture

- To help you recover as soon as possible, your operation is likely to be in the next day or so, unless we need to treat other conditions you have to make the operation as safe as possible.
- The operation aims to:
 - enable you to stand, walk and put weight on your injured leg again;
 - relieve your pain and discomfort.

- The main risks of an operation are infection, bleeding, blood clots, dislocation, confusion (delirium), constipation, chest infections, pressure sores, reduced independence when you go home, and an increased risk of dying. The surgeon performing the operation will discuss these risks with you and we will do our best to reduce these risks.

Alternatives to an operation

- We cannot mend your hip without an operation. The bone takes many weeks to repair by itself, during which time you would not be able to walk on the affected leg and it might be very painful.
- This means you would be bed bound for a long time, increasing your risk of chest infections and pressure sores. There would need to be a very good reason for your surgeon not to offer you an operation, and this would be only if the risks of surgery were very high for you.

Consent

- We must by law obtain your written consent to any operation and some other procedures beforehand. Staff will explain the risks, benefits and alternatives before they ask you to sign the consent form. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to speak with a senior member of staff again