Femoro-acetabular impigement (FAI) - Treatment

Treatment of FAI consists in removing the cause of damaging the soft tissues (acetabular labrum and cartilage) by protruding bony parts. We remove the protruding asymmetric part or the excessive part of the femoral bone. We can do it either by arthroscopy or by a mini invasive surgery. Treatment brings pain relief, allows walking and, most importantly, significantly reduces the chances of early joint damage.

Femoro-acetabular impigement (find out more)

Tear of the glenoidal labrum

The labrum is a seal that secures the joint and doesn't allow the synovial fluid to leak out. Repairing the damage means suturing the labrum or partially removing it (when it's stuck). In rare cases we can think of reconstructing it with the use of the ligament tissue. The labrum, depending on the damage, can be treated either by arthroscopy or mini invasive open procedure.

Tear of the glenoidal labrum (find out more)

Snapping hip - Treatment

Due to the fact that the cause is always the same – contracted fascia and fascia muscle tracts or tendinous muscle parts changed due to inflammation - treatment always begins with physiotherapy. It aims at stretching and improving flexibility of contracted structures, regaining proper body and pelvis position. Additonally, we apply physiotherapy to reduce the inflammation of the tissues around. Our experience shows that snapping hip not connected with anatomical defects can be successfully treated with physiotherapy. Yet the shorter and weaker the symptoms are, the higher probability of successful treatment. Should physiotherapy not work, we proceed to arthroscopic treatment:

- external snapping hip – we perform arthroscopic plasty of the ilio-tibial tract, tensor muscle fascia, fascia lata and gluteal fascia.
- internal intraarticular snapping hip – we perform an arthroscopy of the hip, treat or remove all pathologies of the inside of the joint that might lead to impingement or friction.
- internal extraarticular snapping hip – we perform arthroscopic plasty of the tendinous tissue of the iliopsoas muscle where friction occurs.
Avascular Necrosis of the Femoral Head (AVN) - Treatment

There aren't any unambiguous procedures for surgical treatment of AVN. Thus, if there isn't a collapse of the subchondral layer, we perform procedures of drilling in the femoral bone and support the subchondral layer with grafts. We put our faith in biological treatment and administer the growth factors and stem cells.

Coxarthrosis of the hip

At the first notion of pain we must apply non-weight bearing. The patient must reduce body weight and use crutches or a walking cane.
A physiotherapist is necessary to regain or keep mobility and strengthen muscles. A stationary bike can be of help.
Advanced coxarthrosis is a condition for the implantation of the prosthesis.

Alloplasty

Alloplasty (endoplasty) is a surgical method of treating the hip.

It consists in implantation of a fragment made of metal, porcelain or plastic into the tissues, in order to mobilize the injured organ.
During the alloplasty of the hip joint a part or all hip joint is being implanted.

This is one of the most serious and extensive orthopaedic surgeries. That's why only experienced doctors perform it. During the procedure irreversible cuts and bone plasty are executed. Then elements of the prosthesis are implanted. The elements of the prosthesis render the healthy, natural joint as much as it's possible.

The treatment of coxarthrosis

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