

Hip Osteoarthritis Treatment Guidelines

Hip osteoarthritis is a degenerative joint disease that affects the hip joint. It occurs when the cartilage, which acts as a cushion between the bones in the joint, breaks down over time. This can lead to pain, stiffness, and limited mobility in the hip.

This handout contains treatment recommendations from the American Academy of Orthopaedic Surgeons.

These recommendations are formed when there is sufficient evidence by which to create a directional statement. This is defined as evidence from two or more high quality studies (i.e., a strong recommendation), two or more moderate quality studies (i.e., a moderate recommendation), or statements resulting in a strong or moderate strength.

Tranexamic acid

High Quality evidence supports that tranexamic acid (TXA) should be considered for patients with symptomatic osteoarthritis of the hip who are undergoing total hip arthroplasty (THA) to reduce blood loss and the need for blood transfusions.

- **Quality of evidence:** High
- **Strength of recommendation:** Strong ★★★★★

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Also requires no reasons to downgrade from the EtD framework.

Postoperative physical therapy

High quality evidence supports either formal physical therapy or unsupervised home exercise after total hip arthroplasty for symptomatic osteoarthritis of the hip.

- **Quality of evidence:** High
- **Strength of recommendation:** Moderate ★★★★★
(downgraded)

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Recommendation was downgraded based on EtD framework.

Physical therapy as conservative treatment

Physical therapy could be considered as a treatment for patients with mild to moderate symptomatic osteoarthritis of the hip to improve function and reduce pain.

- **Quality of evidence:** High
- **Strength of recommendation:** Moderate ★★★★★
(downgraded)

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Recommendation was downgraded based on EtD framework.

Intraarticular corticosteroid injection

Intraarticular corticosteroids could be considered to improve function and reduce pain in the short-term for patients with symptomatic osteoarthritis of the hip.

- **Quality of evidence:** High
- **Strength of recommendation:** Moderate ★★★★★
(downgraded)

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Recommendation was downgraded based on EtD framework.

Reference: American Academy of Orthopaedic Surgeons. (2023). *Management of osteoarthritis of the hip evidence-based clinical practice guideline*. <https://www.aaos.org/globalassets/quality-and-practice-resources/osteoarthritis-of-the-hip/oah-cpg.pdf>

Intraarticular hyaluronic acid

Intraarticular hyaluronic acid should not be considered for treatment of symptomatic osteoarthritis of the hip as it does not improve function or reduce pain better than placebo.

- **Quality of evidence:** High
- **Strength of recommendation:** Strong ★★★★★

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Also requires no reasons to downgrade from the EtD framework.

Pharmacological management: NSAIDs

When not contraindicated, oral nonsteroidal anti-inflammatories (NSAIDs) should be used to reduce pain and improve function in the treatment of symptomatic hip osteoarthritis.

- **Quality of evidence:** High
- **Strength of recommendation:** Strong ★★★★★

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Also requires no reasons to downgrade from the EtD framework.

Cemented or cementless femoral fixation

Low quality evidence suggests in older adult patients undergoing total hip arthroplasty for symptomatic osteoarthritis, cemented femoral stems could be considered as they are associated with a lower risk of periprosthetic fracture.

- **Quality of evidence:** Low
- **Strength of recommendation:** Moderate ★★★★★
(downgraded)

Evidence from two or more "Low" quality studies with consistent findings or evidence from a single "Moderate" quality study recommending for or against the intervention. Recommendation was upgraded based on EtD framework.

Exposure approach

High quality evidence supports that there are specific risks and benefits to each surgical approach and that there is not a preferred surgical approach for patients with symptomatic osteoarthritis of the hip undergoing total hip arthroplasty.

- **Quality of evidence:** High
- **Strength of recommendation:** Moderate ★★★★★
(downgraded)

Evidence from two or more "High" quality studies with consistent findings for recommending for or against the intervention. Recommendation was downgraded based on EtD framework.
