

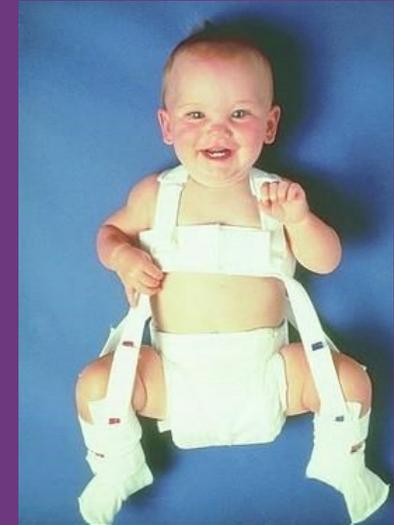
- Your baby may be restless for the first few days after the harness is fitted
- Do not use baby bouncers or walkers
- The harness will be worn for 6 -12 weeks. Ultrasound scan checks and clinic appointments will be arranged during this time

In the case of an emergency, the harness may be removed. Please contact us the next working day for advice.

Orthopaedic department
01935 384319

Sister's office
01935 384409

NHS



Developmental Dysplasia of the Hip

Treatment in a
Pavlik harness sling

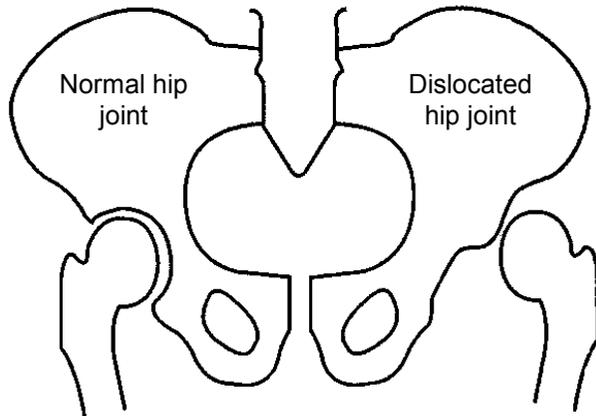
If you require this leaflet in any other format, eg. large print, please telephone: 01935 383077.

What is Hip Dysplasia?

The hip is a 'ball and socket' joint. The top of the thigh bone (femur) is shaped like a ball and fits into a matching cup (acetabulum), but occasionally there are problems that can affect the baby's hip as it develops.

Developmental Dysplasia of the Hip (DDH) describes a variety of conditions in which the ball and socket of the hip do not develop properly.

In the mildest form, the socket fails to grow deeply enough. In the more severe form the head of the femur or ball is displaced completely out of the socket (dislocated). In the past this was known as a Congenital Dislocated Hip (CDH).



Why does it happen ?

About one or two babies in every 1,000 born will have a hip that is not stable at birth. This can be due to various factors such as:

- A family history of DDH
- Multiple pregnancy
- Large baby
- Breech position in the last three months of pregnancy
- Breech birth
- Lack of fluid surrounding the baby in the womb
- Girls are more often affected than boys, particularly the first born.

Is treatment necessary?

If your baby is born with DDH, treatment is best started as early as possible.

The initial treatment is a special harness that the baby needs to wear for several weeks. In most cases this will correct the condition.

Some children do not respond to early treatment or some children are not detected until they are older, the first sign may be the child walking with a limp. These cases may be more difficult to treat and surgery can be necessary.

The aim of the treatment is to hold the hip in the correct position so that it allows the ball and socket joint to grow properly.

About the harness

- **Do not remove the harness once it has been put on as this will disrupt your baby's treatment**
- When the harness is first fitted it will be adjusted so that the baby is comfortable and the hip is held in the best position
- Marks will be made on the leg and shoulder straps so that the correct positioning is noted
- At first the harness will be fitted directly next to your baby's skin. You should check frequently for any sign of skin irritation, keeping skin creases regularly washed and dried thoroughly
- When changing your baby's nappy avoid lifting their bottom up by bringing their knees together. Instead lift up from underneath their back. Otherwise, handle your baby in a normal way.
- The nappy is best placed underneath the leg straps. The leg straps should only be adjusted by a nurse or doctor.
- For feeding, cuddling and winding avoid pulling your baby's knees together. If breastfeeding, prop your baby sideways supported by pillows, making sure that the baby's legs are kept apart.
- Whilst your baby is wearing the harness the position of the legs will be altered however your baby should be able to kick freely. **If you notice that their movement is reduced please contact us.**