

## PERIACETABULAR OSTEOTOMY (PAO)

### MR NICHOLAS FROST

MBBS FRACS (Ortho) FAOrthA  
ORTHOPAEDIC SURGEON

#### GOALS OF SURGERY

The goal of periacetabular osteotomy (PAO) is to relieve pain and restore normal hip joint anatomy. It is hoped that PAO will prevent or delay the development of osteoarthritis of the hip and the need for further hip surgery.

#### BEFORE COMING INTO HOSPITAL

- **X-Rays:** X-rays will be performed prior to consenting for PAO surgery.
- **Blood Tests:** Please complete these as soon as possible and prior to your appointment with the Pre-Admission Clinic (referral attached). These blood tests are to assist in decreasing your risk of transfusion at the time of surgery.
- **Group & Hold Blood Test:** This needs to be undertaken five days prior to the date of your surgery (referral attached).

**Preparations:** Prior to surgery please you should use a special body wash and nasal ointment to decrease the volume of bacteria on your skin. This helps minimise the risk of infection at your surgical site.

- **Prescription:** Please have the attached prescription filled and commence application five days prior to your procedure (prescription attached).
- **Preoperative Wash:** Please purchase Chlorhexidine Preoperative Wash 4% from your local pharmacy. This is an over the counter product. Use of the wash must be commenced 24 hours prior to your surgery (instructions are attached).

**Aids:** You should arrange for purchase or hire of elbow crutches (or a walking frame) from your local chemist or surgical appliance supplier and bring these with you to hospital.

**Preadmission Letter & Estimate:** These will be provided to you by Mr Frost's Secretary. Please read carefully as they include important information regarding your fasting, admission time, postoperative appointment and fees.

**Medications:** Thoroughly read the list of medications provided to you in your preoperative pack. This will give you instructions on cessation of medications preoperatively. If you are unsure please discuss it with Mr Frost.

**Preoperative Physiotherapy:** You are required to undergo a three month period of nonoperative management. This may take place prior to your first consultation with Mr Frost, although in some circumstances you may be asked to visit a Specialist Physiotherapist.

#### YOUR HOSPITAL STAY

**Admission:** On most occasions you will be admitted on the day of your surgery and will meet with Mr Frost and your Anaesthetist prior to surgery. This will give you time to ask further questions.

**Anaesthetic:** For most patients a spinal anaesthetic is preferred as this assists in reducing blood loss during surgery and provides more comfort in the postoperative period. In addition you will have a drip delivering local anaesthetic to the hip, decreasing your need for strong painkillers.

**Blood Management:** A "cell saver" device is used to capture any blood loss during your surgery and return it to you at the end of your operation.

**Immediately Postoperatively:** You will be taken to a ward specialising in postoperative surgical care. To decrease your risk of blood clots you will have a pump attached to your calves and will receive an injection into the abdomen of a blood thinner. This will help to maintain a healthy circulation.

**Review by Physiotherapist:** In most cases you will be reviewed by the Physiotherapist at Hollywood Private Hospital on the day of your operation. You should expect to stand with assistance the day following your surgery and typically be able to mobilise with crutches by the 3rd postoperative day.

**Time in Hospital:** The typical time in hospital following PAO is 5 days.

**Review by Mr Frost:** Mr Frost will see you on the ward before your discharge from hospital.

# PREOPERATIVE & POSTOPERATIVE DETAILS

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#### AFTER DISCHARGE FROM HOSPITAL

**Mobility:** You will be asked to use crutches and limit your weight bearing for approximately 6 weeks. You will be asked to avoid running and sporting activities until 12 weeks following surgery.

**Aids:** You will require crutches for 6 weeks postoperatively and following this you will wean off the crutches over a further 6 weeks depending on strength and comfort.

**Pain Relief:** You should expect to require pain relief for approximately 2 weeks and thereafter hopefully your need for pain relief will be diminished. All required pain relief will be provided to you prior to discharge from the hospital. You may also be provided with medications to prevent constipation (a common side effect of pain relief medications).

**Driving:** You will be required to avoid driving for 6 weeks following your surgery. Even if you feel capable of driving, your reaction time will be slowed during this period.

**Dressings:** Your wound dressing is designed to remain clean, dry and intact until your first postoperative visit

**Work:** If you have an office based job, you may feel able to return to work 2 weeks postoperatively. If your work involves a more physical component, 6 weeks leave is recommended.

**Flying:** Flying within 6 weeks of surgery has a higher risk of DVT (deep venous thrombosis) and is discouraged, although in certain circumstance this may be required. Please discuss any intention to fly with Mr Frost prior to your surgery.

**1st Postoperative Appointment:** Mr Frost will review you in his Nedlands rooms approximately 2 weeks postoperatively and review your surgical wound. In most cases a dissolving suture (stich) is used and will not require removal.

**2nd Postoperative Appointment:** Mr Frost will review you again (in Nedlands or Kalamunda) 6 weeks postoperatively with an x-ray prior.

#### POSTOPERATIVE REHABILITATION

Due to the specialised nature of PAO surgery, you will be referred to Ms Jennifer Woodhouse at Hollywood Functional Rehabilitation Clinic for specialised care and rehabilitation. Mr Frost's correspondence from your inpatient stay will be forwarded to the Clinic. If travel to Nedlands is difficult then the team at Hollywood Functional Rehabilitation may be able to coordinate care with a Physiotherapist in your local area.

#### WHAT TO EXPECT

In general, although there may be ups and downs, your pain should decrease steadily from the time of surgery and by the 2 week postoperative mark you should be generally comfortable at rest. Your mobility should increase during this time. In restoring your hip joint anatomy to a normal configuration your hip should perform in a pain free and durable manner for many years into the future.

#### QUESTIONS & CONCERNS

If at any stage you find your pain to be increasing, swelling in the leg markedly increasing despite an appropriate period of rest and elevation, redness or wound discharge please contact Mr Frost immediately.

Hours: Mr Frost's rooms (08) 9389 3800

After Hours: Hollywood Private Hospital switchboard (08) 9346 6000

*NB: This is a guide only and should not be a replacement for the advice of Mr Frost or a medical professional.*