# DR. AZIZ BHIMANI

Hip and Knee Surgeon

For all appointments and enquiries please call (02) 4229 9116




# HIP SURGERY APPROACHES

## The Antero-lateral Approach

In the conventional-antero-lateral approach the hip abductor (gluteus medius and minimis) muscles/tendons are detached and split. This approach also cuts through the tendons of gluteus maximus and tensor fascia lata muscles.

## The Posterior Approach

In the conventional-posterior approach the gluteus minimis muscle is cut off the capsule. The posterior approach also cuts through the tendons of gluteus maximus, tensor fascia lata, piriformis, gemelli and obturator muscles.

## The Direct Anterior Approach

The direct anterior approach incision is only 7-10cm in length, whereas antero-lateral or posterior approach incisions are usually between 15 - 30cm in length.

With the direct anterior approach there is no detachment, splitting or denervation of muscle. No muscles or tendons are cut as they are simply retracted to create a gap. The tensor fascia lata muscle is retracted laterally whilst the rectus femoris muscle is retracted medially. There is no gluteal (buttock) muscle injury with this approach.

The gluteal muscles provide the main hip power and stability and as they are entirely intact with the direct anterior approach a faster recovery is expected.

The direct anterior approach enters between the nerve supply to the muscles so the muscle fibres retain their full ability to function after the operation.

Other approaches permanently damage either muscle fibres and/or the nerves which supply them so there may be a permanent loss of nerve function and/or partial muscle wasting.

Remember that ALL approaches if performed correctly will result in a successful pain free outcome that should last at least 20-30 years using modern day implants.