

Hip replacement patients may safely drive as early as two weeks following surgery

March 24 2015

Thanks to improved surgical, pain management and rehabilitation procedures, patients who undergo a total hip replacement (THR) may be able to safely drive as early as two weeks following surgery, according to new research presented today at the 2015 Annual Meeting of the American Academy of Orthopaedic Surgeons (AAOS).

Each year, more than 322,000 [patients](#) undergo [hip replacement](#) surgery in the U.S. Previous studies, conducted more than a decade ago, recommended between six and eight weeks of recovery before driving; however, recent advances in surgical treatment and care may have shortened this time frame. A shorter driving ban would allow patients to more quickly resume daily activities and return to work.

In this study, which appeared online November 2014 in the Journal of Arthroplasty, researchers evaluated 38 patients who underwent right THR between 2013 and 2014. Driving performance was evaluated using the Brake Reaction Test (BRT), which measures brake time reaction after a stimulus. All patients underwent preoperative assessment to establish a baseline [reaction time](#), and then agreed to be retested at two, four and six weeks after surgery. Patients were allowed to drive when their postoperative reaction time was equal to or less than their preoperative baseline reaction time. At each testing session patients were asked if they felt ready to drive again.

Of the 38 patients, 33 (87 percent) reached their baseline time within two weeks. The remaining patients (13 percent) reached their baseline at

four weeks. Among the other findings of the study:

- There were no differences with respect to age, gender, or the use of assistance devices in terms of driving readiness.
- Of the 33 patients who tested ready to drive at two weeks, 24 (73 percent) stated that they felt ready to drive while five (15 percent) were not sure. Four patients (12 percent) reported that they did not feel ready to drive.
- Of the five patients who returned to driving at four weeks, three agreed that they were not able to drive at the two-week mark, and the other two thought they were able to drive by two weeks.

"We found that brake reaction time returned to baseline or better in the vast majority of patients undergoing contemporary THR by two weeks following surgery, and all patients achieved a safe brake reaction time according to nationally recognized guidelines," said lead study author and orthopaedic surgeon Victor Hugo Hernandez, MD.

Dr. Hernandez said the "findings have allowed us to encourage patients to re-evaluate their [driving](#) ability as soon as two weeks after THR," but warned that the study results "are based on our particular population, and caution should be taken in translating these results to the regular population." In addition, patients should never drive if they are still taking narcotic pain medication.

Provided by American Academy of Orthopaedic Surgeons

Citation: Hip replacement patients may safely drive as early as two weeks following surgery (2015, March 24) retrieved 23 May 2024 from <https://medicalxpress.com/news/2015-03-hip-patients-safely-early-weeks.html>

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