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Your hip pain?

In a healthy hip, the bones forming your joint are cushioned by cartilage a thin lining that reduces friction and absorbs shock.

When osteoarthritis affects your hip joint, the cartilage cushioning the bones softens and wears away, which causes the bones to rub against each other. This causes pain and stiffness that can worsen over time.²

While a certain amount of cartilage wear is expected as we age, your genetics and lifestyle can affect how likely you are to get hip arthritis. Limb misalignment, rheumatism, metabolic disease, or frequently carrying uneven loads or sustaining an injury can damage your joint's cartilage and trigger the condition.

2 https://www.nhs.uk/conditions/arthritis



In the beginning, your hip only hurts when moving, but eventually, you'll feel pain all of the time.

REMEMBER, THIS IS ALL ABOUT YOU, AND

You are not alone

When you suffer from advanced osteoarthritis, your hip pain may seem to disrupt everything...

Activities you once loved now cause you too much discomfort to enjoy, and you find it hard to be your usual self around friends and family because it's hard to focus. Why? When you're feeling it constantly, hip pain doesn't let you think about anything else.

At Zimmer Biomet, we understand that hip pain can force you to change your life plans, but we want you to know that you're not alone in this journey. Osteoarthritis is the most common musculoskeletal condition worldwide³, and our solutions have helped millions of people just like you to overcome similar experiences and come out happier and healthier on the other side.

3 https://www.who.int/news-room/fact-sheets/detail/musculoskeletal-conditions

Having exhausted conservative treatments, like physical or medication therapy and hip injections, you're now at the stage where your surgeon has suggested you consider surgery.

Our implants are designed to get your life back on track and give you the freedom to live your life.



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Once chosen, the new components need to be fixed safely into your bones:

Cemented implants

A cemented implant will be held in place with a special bone cement (shown in green on the image). The bone cement acts as the 'grout', that holds the implant safely in place.

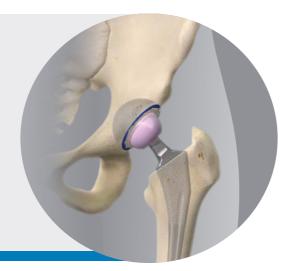
The Cement sets within minutes and under normal circumstances can support your body weight on the day of your surgery.



Types of hip replacement:

Total Hip Replacement

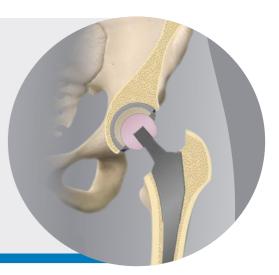
In total hip replacement, damaged bone is replaced by a metal stem and hip cup. A metal or ceramic ball-shaped head is placed on the stem and slots into the cup, articulating with a plastic or ceramic insert to allow for smooth movement between socket, and ball.



Cementless implants

Cementless implants allow your bone to grow onto, or into their surface, so they can become fully integrated into your bones.

Under normal circumstances the implant can support your body weight on the day of your surgery.



Using their experience, your surgeon will decide what implant they will use for your surgery.

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PREPARING FOR

Hip replacement surgery

Here are some tips on how to prepare for surgery:

Prepare yourself physically

Before surgery, your doctor may look at the medication you currently take and suggest you make changes to your diet or begin exercising.



If you are a smoker, you should tell your doctor as smoking can delay your recovery.

Tell your doctor if you are currently having a course of dental treatment. To prevent germs in your mouth from entering your bloodstream and causing an infection, your doctor might ask you to stop or delay any dental works.

One of the decisions prior to hip replacement surgery is what type of anaesthesia will be administered. Before your surgery is scheduled, your anaesthesiologist will review your past medical history, give you an examination and then discuss the type of anaesthesia recommended for you. Ultimately, the final decision is made jointly between you and your anaesthesiologist.

General anaesthesia involves a complete loss of consciousness, while regional anaesthesia numbs a specific area of the body without altering brain or breathing functions. Occasionally, the anaesthesiologist will strongly recommend one over the other because of your current medical condition or because of the type of procedure.



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PREPARING YOUR HOME FOR

Hip replacement surgery

Your care team will give you some suggestions and guidance about how best to arrange your home for your recovery. There are many things you can do to aid your independence:



Arrange furniture so it's easier to get around your home.



Remove trip hazards to prevent falls.



Note any uneven floors and steps.



Raise your bed or rent a hospital bed, so it's not too low.



Choose high-armed chairs with firm seats.



Keep things in easy reach particularly items you use often.



Be aware of areas that get wet and put non-slip mats down.



Use a raised toilet seat to make sitting and standing easier.



Install railings where you might need more support.



Prepare and freeze some meals, that you will then only need to reheat.



Dressing sticks, sock aids and tight aids.



Long shoehorn, to aid you putting on and taking off your shoes.



Bathtub seat, shower stool, shower mat, long-handled sponge.



Shopping trolley, to ensure that you aren't over-loaded and can focus on your footing.



Restrict pets to their own area of the house, so they don't cause you to trip.

Things that might be useful to take to the hospital:



Pyjamas or nightgown and dressing gown.



Flat shoes (not sandals) with non-slip soles.



Toiletries (toothbrush, soap, brush etc).



Shoehorn with a long handle.



Tracksuit with a wide-cut entrance for your foot.



Backpack or fabric bag with long handles.

Recommended for your hospital stay and at home:



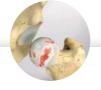


WHAT HAPPENS During your procedure

The surgery time, and time spent in the recovery area, should take around one to three hours.



Steps of your hip replacement surgery



Your surgeon makes an incision on your hip to see the joint.



The damaged surface of your socket is prepared for the new socket.



The ball end of your thigh bone is removed and the bone is prepared for the hip stem.



The new socket is now fitted by your surgeon.



Your surgeon places a metal hip stem into your thigh bone with either a metal or ceramic ball head.



Finally,the ball and socket are joined. When your surgeon is satisfied with the fit and function, the wound is closed and pressure bandages are applied.

IMMEDIATELY

After surgery

You'll be moved to the recovery room where you'll be monitored by specialised nurses. They'll look after you while you're unconscious, and ensure a good recovery from the anaesthetic, before you can be transferred to a regular ward.

Know what happens after surgery

For the first few days, your hip will be swollen and tender; all of this is normal.

Your first movement and steps

Depending on the time of your operation, the staff will encourage you to start gentle exercises and may assist you to move from the bed to an armchair. Most patients will be able to walk on the same day of surgery. This early movement promotes good circulation and movement of your hip. Being in a more upright position will help reduce the risk of breathing complications and remind you that you are not sick.

> You should always use walking aids to climb stairs until you're certain you no longer need their support.

Walking again

To get you back on your feet after surgery, you'll learn to walk with walking aids first and then with crutches.

Typically, you'll use the crutches to walk on both legs. Your healthcare team will let you know when you're safe only to use one crutch or stop using them altogether.

Your pain control

Good pain control will allow you to sleep better, helping your body heal more quickly and enabling you to leave hospital sooner.

Our pain perception is very different from one person to the other, so if you have pain, don't hesitate to ask your medical team, they are there to help you and would not want you to be uncomfortable.

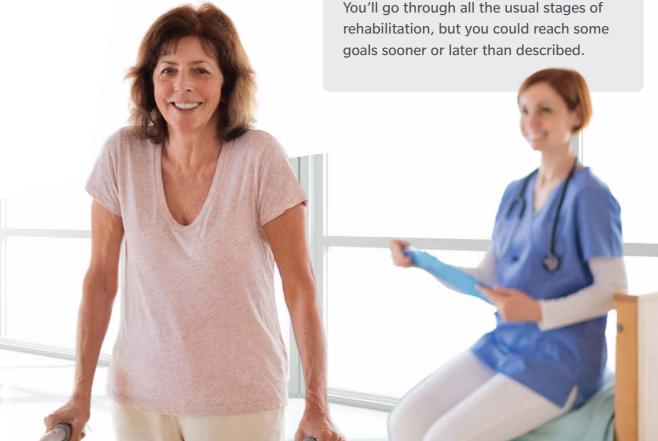
Going home

You'll typically be in the hospital for 1-3 days, and before you're allowed home, you'll need to accomplish discharge goals like:

- Getting in and out of bed by yourself. \vee
- Having a manageable amount of pain.
- Being able to eat, drink, and use the bathroom.
- Being able to perform the prescribed home exercises.
- ✓ Walking with an assistive device (walker, or crutches) on a level surface and being able to climb up and down a required number of stairs.

Your recovery

Because everyone is different, the time it takes you to recover will be unique. You'll go through all the usual stages of



THE SIDE EFFECTS OF

Hip replacement surgery

Your care team understands that your body is unique, and they'll be aware of how best to keep you safe during and after surgery. However, it is always good to be aware of any possible side effects and if at all concerned discuss with your surgeon.

Normal effects after your surgery

As part of the usual healing process, you'll probably experience the following:

A certain amount of pain

Any pain you experience will be at its worst for the first 24 hours after your surgery, and then it should

begin to ease. Your care team will manage your pain with medication.

Swelling and bruising

For several weeks after your surgery, the area around your new hip might be swollen, but this will reduce.

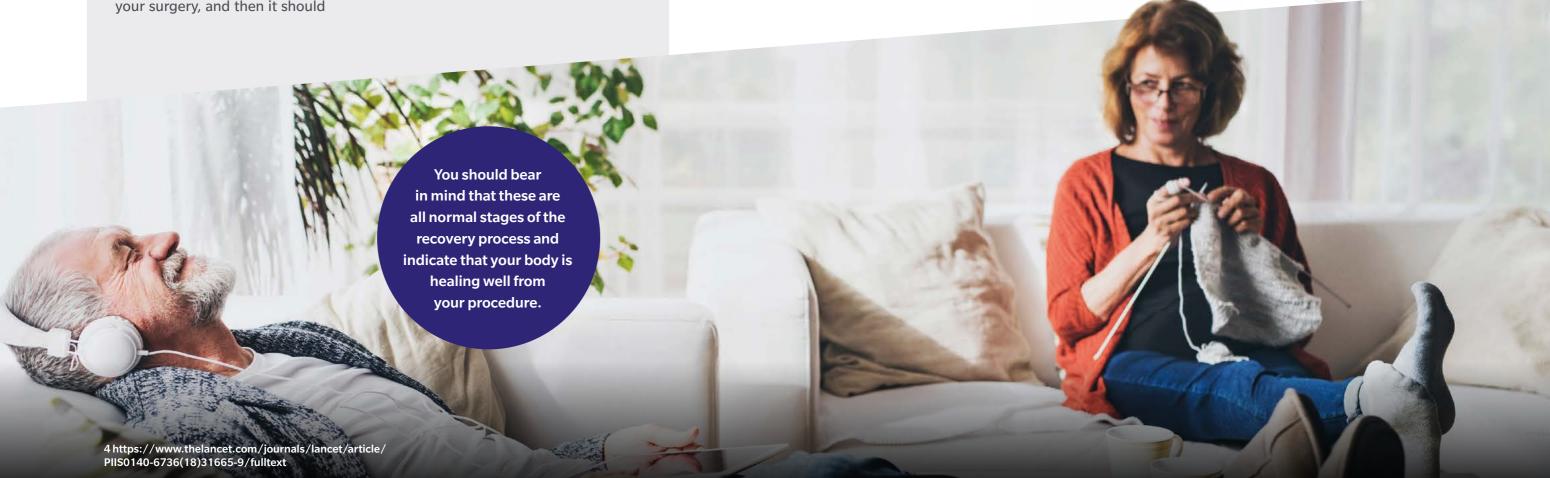
Feeling numb

You will likely experience some numbness around the surgery site for the first few weeks after surgery, but this should go away over time.

Like with any surgery, joint replacement can have some risks. To fully understand potential risks and how your care team will help you minimise them, please speak to your surgeon.



Hip replacements are among the most successful treatments in medical history, lasting around 15 years.4 A successful implant will improve your mobility and reduce pain.



GETTING SETTLED Back at home

The following are some suggestions that might make life a little easier once you're back at home:



Ask someone to help with your house work for a while.



Ensure that you do not change your sleep pattern and try to get a good night's sleep.



Follow your doctor's advice about painkillers.



You might feel more tired than normal, so plan rests for mid-morning and mid-afternoon.

You'll have swelling around the hip joint, so you might find baggy clothes more comfortable.

It is not uncommon to get a slight increase in pain around 6-12 weeks after surgery.

This is usually as a result of increased confidence and therefore increased activity. If you experience an increase in pain, make sure you allow enough time for rest after activity.

Be patient with yourself.



HOW TO MOVE During your recovery

After your surgery, the goal is to be as active as possible and to slowly perform all the tasks of daily life using your operated hip as naturally and as much as possible.



Sitting down or getting up

Using walking aids

Keep your feet straight and shoulderwidth apart, and place the two aids in front and slightly to the side of your feet. Bend your elbows and put your weight on the handles, supporting your body weight with your hands.

It's best to sit straight on a high chair with armrests. Keep your hip slightly higher than your knees and keep your legs at a wide-angle.



If the stairs have bannisters, use only one walking aid. Put your healthy leg on the higher step and use the walking aid to support your operated leg, place your free hand onto the bannister. Support yourself with the banister and walking aid and now put your operated leg onto the same step and when and you feel confident and without pain move on to the next step - repeat to climb the stairs.



Walking downstairs

Initially this is not as easy as going upstairs, but try not to worry if you find this difficult. Place both walking aids on the next lower step, then move the operated leg to that step while supporting your weight on the walking aids. Then move the healthy leg to the same step and when you feel confident and without pain repeat the process to descend the stairs.



Taking a shower

Wear non-slip shoes and always get into and out of the shower one leg at a time. Consider adding aids to the shower to make it safer, such as a non-slip mat, secure shower stool with four legs and a sponge with a long handle.



Taking a bath

Only take a bath when you feel safe to do so and when the scar is perfectly healed. Place a secure square stool that's slightly higher than the bath's edge next to the bath. Always lift your healthy leg into the bath first, and use your hands to support the weight of your operated leg. Aids such as a bathtub seat, non-slip mat and handles might make bathing easier.



Putting on shoes

Wear flat, stable, laceless shoes that you can put on without leaning forward. Use a shoehorn with an extralong handle to put shoes on and take them off.



Getting dressed

Early in your recovery, it's best to have someone help you get dressed or use a dressing stick and sock aids. Use the stick to grasp a garment's waistband and pull it over your hip. Then use the walking aid to get up and pull the garment up. When undressing, always unclothe your healthy leg first.



Getting into bed and sleeping

Remain straight and tilt your upper body backwards slightly, then lift one leg at a time into bed. You should sleep on your back with your legs spread slightly, but if you're a side-sleeper, keep a pillow between your legs so you can't cross them.



Getting out of bed

Place your buttocks on the edge of the bed, then lift one leg at a time out of bed. Your bed should be stable and about 70cm tall—if it's too low, put a second, harder mattress in the bed or raise the bed frame.



Getting into a car

Get into the car on whichever side gives you more legroom. Turn your back to the seat, sit down and lift your legs into the car, supporting your thighs with your hands. Be sure to move slowly. To get out of the car, do the same in reverse.



Don't drive until your doctor tells you it's safe to do so and be aware that some medication might affect your reaction time.



Sexual activity

For the first six to twelve weeks after surgery, you should avoid having sex to not put too much strain on the joint. For some time afterwards, you should have sex in positions where you can lay on your healthy side, and for men, it is recommended to lie on your back. Make sure you don't put too much weight on your operated hip and be careful not to bend it more than 90 degrees.





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