

# BABY HIP HEALTH

Do you know the risk factors for Hip Dysplasia?

Your child should have an ultrasound within 6 weeks if there is:

- Breech presentation (bottom or feet first)
- Multiple Births
- Hip instability and/or physical signs suggesting of a possible dislocated hip during a clinical examination
- Positive Family History such as mother, father, brother or sister, have had a hip problem treated as a child

For babies with any of the above risk factors, hip ultrasound examination should be arranged. In the case of multiple births with these risk factors, all babies in this pregnancy should have a hip ultrasound examination.



DDH is not painful and it can be difficult to diagnose in infants. DDH is a developmental condition therefore it can develop at a later stage. However, there is also the possibility to miss DDH in an infant.

It is therefore important to be aware of the key signs of hip dysplasia in the first few years of life of your baby.

Potential symptoms may include;

- unequal leg lengths
- hip clunks or pops
- when changing a nappy one leg does not seem to move outwards as fully as the other or both legs seems restricted.
- the child crawls with one leg dragging
- asymmetric buttock creases (though this is also seen in many normal babies)

In older children a limp if one leg is affected or waddling walk if both hips are impacted. DDH diagnoses can only be confirmed by either ultrasound or x-ray imaging.

WANT TO KNOW MORE?

Please call 01925 750271 for a free Baby Hip Health booklet or contact a health professional for advice

[www.stepsworldwide.org](http://www.stepsworldwide.org)



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