Slipped Capital Femoral Epiphysis

The top of the thigh bone is shaped like a ball. Usually this ball sits in the socket of the hip bone. This lets the legs move smoothly. Sometimes the ball slips backwards. Usually this happens after a time of fast growth. That is why it occurs most often in children and adolescents, especially those 8 to 15 years old.

When the bone moves out of place, the youth is said to have a *slipped capital femoral epiphysis*. The condition can cause pain in the hip, knee, thigh or groin. The patient might develop a limp. Surgery is usually needed to fix the condition.

With proper treatment, a patient with this condition can almost always go on to have a normal life.

CAUSE

- A growth spurt is usually the reason the bone slips out of the socket. In children of this age, an area of at the top of the thigh bone is called the *growth plate*. Another name for it is the *epiphysis*. While a child is still growing, this area is weak. That could lead to slipping. Once growth is done, solid bone takes the place of the epiphysis.
- Being very overweight (obesity) often plays a role. A youth may simply weigh too much for how tall he or she is.
- Sometimes a fall or other injury can cause the condition. This is not usually the case.

SYMPTOMS

- Leg pain, especially in the thigh.
- Pain in a knee or hip joint.
- Pain that gets worse with activity.
- Pain whenever weight is put on the leg.
- Limping.
- A leg that turns outward.
- A leg that seems shorter than the other leg.

DIAGNOSIS

To decide if a youth has a slipped capital femoral epiphysis, a healthcare provider will probably:

- Ask about any symptoms.
- Ask about the youth's overall health, now and in the past.
- Examine the youth's hips and legs.
- Ask the youth to walk, if possible. This lets the healthcare provider see how movement is affected.
- Ask the youth to move the leg in various ways. This checks other motions.
- Order imaging tests. These take pictures inside the body. Tests may include an X-ray, or maybe an ultrasound (which uses sound waves to create a picture).

TREATMENT

Surgery is usually recommended to treat a slipped capital femoral epiphysis. At first, though, a cast might be used to *immobilize* the hip and leg (stop movement). When it is time for surgery, there are several options. They usually include using pins or screws to prevent slipping from happening again. Options include:

- Putting a screw in the ball at the top of the thigh bone. This holds it in the socket.
- Moving the ball back into the socket. Then, using two screws to hold it in place.
- Removing the growth plate. Then, screwing the ball of the thigh bone into the hip socket.

POSSIBLE COMPLICATIONS

Treatment is usually successful in children and adolescents. But, it is possible that the patient may:

- Develop arthritis.
- Have less range of motion.
- Have continuing hip pain or stiffness.
- Have changes in the way the leg grows.
- Have less blood flowing to the hip than normal.

HOME CARE INSTRUCTIONS

- Make sure the child goes to all appointments with his or her healthcare provider and any specialists. These appointments are important for the best recovery.
- Make sure the youth takes any medications prescribed by the healthcare provider. This includes pain medicine.
- Be sure to get a referral for physical therapy. This is very important for a full recovery. This will help the child:
  - Learn to use crutches. They will be needed after surgery.
  - Learn how to do exercises that will help regain movement in the hip.
- Make sure the child practices the exercises suggested by the physical therapist. Moving in safe ways should help their joints feel better.
- Limit their activity. It may be awhile before the patient can be as active as he or she once was. Some activities may be too rough for a healing hip bone. Make sure the healthcare provider's instructions on this are followed.

SEEK MEDICAL CARE IF:

- You have any questions about medications.
- The child continues to have pain, even after taking pain medicine.
- The child develops a fever of more than 100.5° F (38.1° C).

SEEK IMMEDIATE MEDICAL CARE IF:

- After surgery, the area of the incision (cut) becomes red or swollen or feels hot. Or, if fluid oozes from the incision site.
- The child feels too much pain to be able to walk or move.
- The child develops a fever of more than 102.0°F (38.9° C).

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