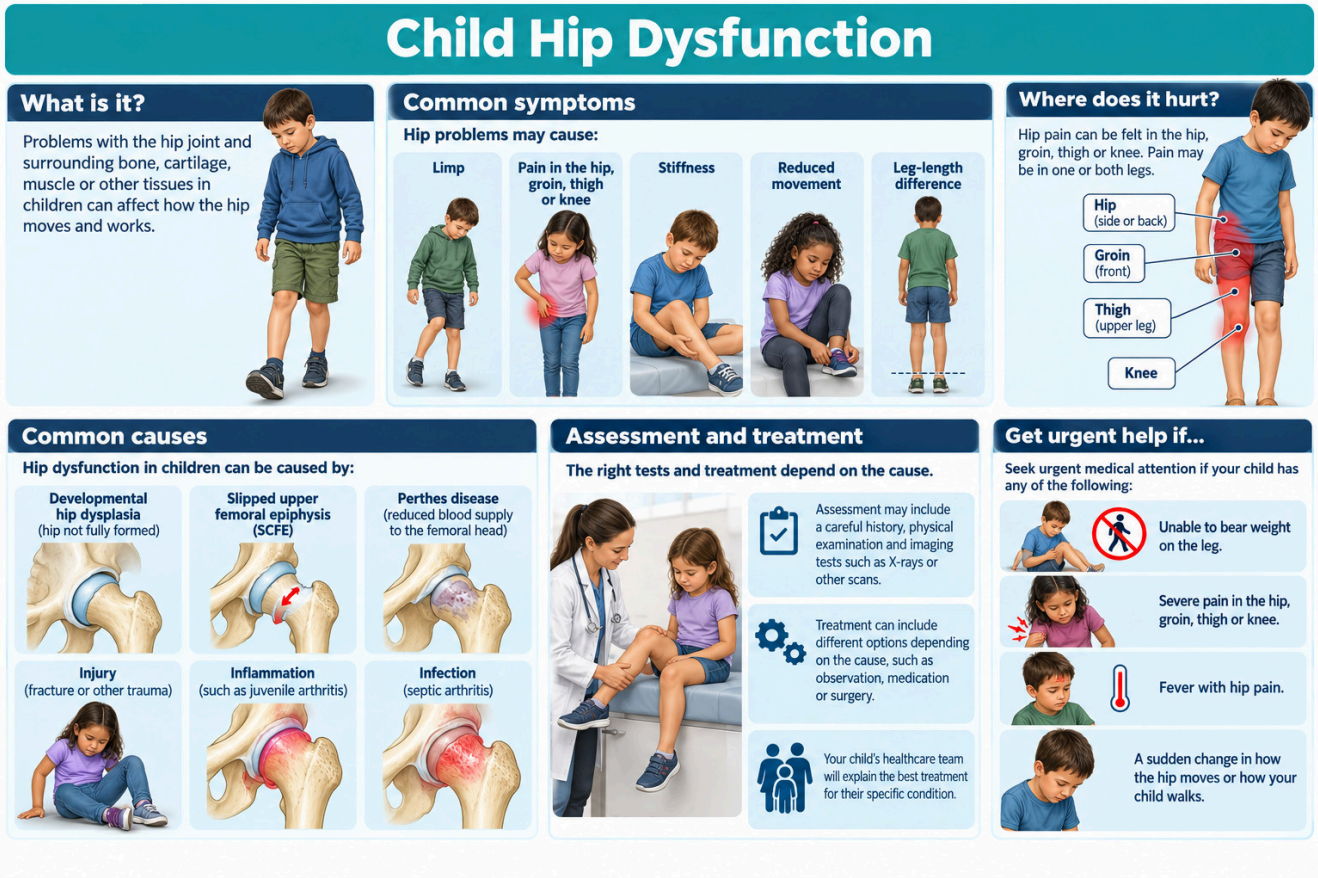
Child Hip Dysfunction

Information for children, parents and carers

Child Hip Dysfunction

A guide to symptoms, treatment and recovery



Understanding child hip dysfunction

Hip dysfunction means problems affecting a child's hip joint that can cause pain, stiffness or difficulty moving the leg. Causes include developmental dysplasia of the hip (DDH), SCFE, Perthes disease, injury, inflammation or infection.

Supporting your child

Early diagnosis and appropriate treatment help most children recover well. Treatment and activity advice depend on the cause. Regular follow-ups help monitor progress and prevent long-term problems.

Symptoms and assessment

Understanding the cause and when to seek help

Signs and symptoms

- Limping or an unusual walking pattern
- Pain in the hip, groin, thigh or knee
- Limited hip movement
- One leg appearing shorter
- Hip clicking or popping

Common causes

DDH: the socket does not fully cover the ball of the hip.
SCFE: the ball at the top of the thigh bone slips out of position.
Perthes: a temporary reduction in blood supply weakens the femoral head.
Other causes: falls, accidents, sports injuries, inflammation such as transient synovitis, or infection such as septic arthritis.

How is it diagnosed?

Your child's team examines hip movement and leg alignment. X-ray, ultrasound or MRI may confirm the cause. Blood tests are sometimes needed to check infection or inflammation.

Seek urgent medical advice

- Cannot bear weight
- Severe hip or knee pain
- Fever with hip pain
- Sudden change in hip or leg movement

Contact your child's healthcare provider immediately.

Key message

Early diagnosis and appropriate treatment help most children recover well. Treatment and activity advice depend on the cause. Regular follow-ups help monitor progress and prevent long-term problems.

Recovery and rehabilitation

Activity guided by your child's healthcare team

Before starting activity

Your child needs advice matched to the cause of the hip problem. Encourage only the gentle exercises advised by the physiotherapist.



Activity guidance

Assessment first: establish the cause before starting a programme.
Mobility and strength: follow the exercises prescribed for your child.
Activity: avoid high-impact activity if the hip is painful.
Reviews: keep follow-up appointments and report changes.

Important precautions

Do not begin exercises when your child cannot bear weight, has severe pain, fever with hip pain or sudden movement changes. Seek urgent medical advice.

Treatment and next steps

Caring for your child and finding support

Treatment depends on the cause

Mild cases, particularly in very young children, may need observation. Physiotherapy can strengthen hip muscles and improve mobility. Braces or casts may be used in DDH or Perthes disease. Pain relief or anti-inflammatory medicines may help. Severe cases may need surgery to correct alignment.

Home care and support

- Encourage gentle exercises only as advised
- Avoid high-impact activity if your child is in pain
- Use pain relief only as prescribed
- Keep regular follow-ups with the healthcare team

Questions or concerns?

Contact the healthcare team immediately for inability to bear weight, severe hip or knee pain, fever with hip pain or sudden changes in movement.

Recovery outlook

Most children recover well with early diagnosis and appropriate treatment. Regular reviews monitor progress and help prevent long-term problems.

Further information

NHS - Developmental Dysplasia of the Hip
NHS - Perthes Disease
Physiotherapy advice for children

B-Well Physiotherapy Services
0300 303 4811
bwell.mskberkshire@nhs.net
www.bwellberkshire.co.uk