What is hip dysplasia?

It all began when a mother had the vision and the resources to help others avoid the problems she faced with her son. One paragraph written by Cara Whitney captures the essence of what we are trying to achieve. “Once I started questioning the system of curing hip dysplasia I realized there was no system. No categories, no percentages. The only thing that has been agreed is that ‘We don’t know,’” she says. “We need a place to learn, create and gather information about something that is curable but could be cured more efficiently with less harness hours logged and avoiding surgeries. Developing a system that all doctors with less experience can use confidently (avoiding the ‘I don’t know’). The possibility of creating a universal harness and a website that is informative to doctors and parents who want the answers I was seeking.”

The International Hip Dysplasia Institute (IHDI) is a not-for-profit effort to improve the health and quality of life of those afflicted with hip dysplasia.

The IHDI is supported by the Arnold Palmer Hospital Foundation in Orlando, Florida, with major sponsorship from Dan Whitney (“Larry the Cable Guy”) and his wife, Cara. With this combined effort, we have joined forces with several noted medical centers around the world to promote prevention, diagnosis and treatment of hip dysplasia.

When you visit hipdysplasia.org, you will enter a website developed for the sole purpose of answering your questions about hip dysplasia. A website developed so you can find in one place the answers you need. A website that is always changing to keep you updated with the most current information. Some examples are:

- Information for parents
- Finding a specialist
- Practical tips during treatment
- Living with hip dysplasia
- Questions to ask the doctor

FACTS ABOUT HIP DYSPLASIA

- What are the symptoms and signs of hip dysplasia?
- Hip dysplasia treatment methods
- What if treatment fails?

LEARN MORE ABOUT US

- Our Mission
- Our Affiliates
- The Medical Advisory Board
- The International Advisory Board
- Sponsored Research and Clinical Trials

For answers to your questions go to hipdysplasia.org

The International Hip Dysplasia Institute depends completely on the generous support of those who believe in the mission of reducing the burden of hip dysplasia through family support, prevention, advocacy, education, research, and treatment of hip dysplasia worldwide. For more information on how you can make a charitable contribution, please visit our website, hipdysplasia.org. Children and families around the world appreciate your support. Thank you!
Hip dysplasia is the medical term for instability, or looseness, of the hip joint that affects thousands of children each year. This ranges from mild instability to complete dislocation. Approximately one out of every 20 full-term babies has some hip instability and two to three per 1000 will require treatment.

Persistent hip instability is a silent childhood condition that frequently causes disability and arthritis in adults. In spite of the frequency and the potential for lifelong disability, there is poor awareness of this condition outside the medical profession. Early diagnosis and simple treatment is the best solution, but some cases are undetected or difficult to treat with current methods of care. Also, many children around the world do not have access to early diagnosis and treatment.

Please visit hipdysplasia.org for more information.

Doctors use a number of different terms for hip dysplasia depending on severity and time of occurrence. These names include:

- Hip Dysplasia
- Acetabular Dysplasia
- Hip Dislocation
- Congenital Dislocation of the Hip (CDH)
- Developmental Dislocation of the Hip (DDH)
- Developmental Dysplasia of the Hip (DDH)

The term Developmental Dysplasia, or DDH, is generally preferred for infants because this condition can develop after birth. Also, the term congenital tends to refer to a defect where something is missing or added to normal tissues. In the case of DDH, the infant’s joint is otherwise normal except for the instability.

When the hip is completely out of the joint, it is called a dislocation. The hip is a ball-and-socket joint that is held together by ligaments. The ball is called the head of the femur (femoral head) and the socket is called the acetabulum.

In some infants the ligaments around the hip joint are loose and the ball does not stay in the socket. Sometimes the condition is mild and resolves spontaneously. Other times the ball is slightly or completely dislocated from the socket.

Hip dysplasia and dislocation are usually diagnosed by routine examination of the infant.

A “hip click” can be a sign of hip dislocation, but this can also be a normal finding in some infants because there are ligaments inside the hip joint that can make a snapping noise in certain positions. But even with careful examination, complete hip dislocation can be difficult to detect in newborn infants. Also, there are documented cases where the hips were normal at birth, but became dislocated in the first few months of life. This is why it is important for babies to have regular examinations of the hips during the first year of life. An ultrasound study in young infants or X-ray study in older infants and children is performed when hip dysplasia is suspected. This is necessary to make the diagnosis or to be sure the hip is normal.