Today, I hope that we can:

I think that my hip problems are due to: (Please write below)

I would like some help with: (please circle what matters most to you)

What is likely to happen with my hip problems?

Hip pain varies among people. Most people can manage their hip problems with simple treatments. These include exercise or medication.

About 1 out of every 10 people will have surgery to replace a hip in the first 10 years after they see their doctor, nurse or therapist. About 9 out of every 10 people will not.
General Questions:
What are the advantages and disadvantages of these options?
How much better will I feel, and when?
What practical things should I know?
Should I choose one option or try several?

Notes

What should I do?
People who stay active or go to work with hip problems recover faster and have less pain than people who rest.
Exercise, physical activity and weight loss
Many people with hip pain, including osteoarthritis, will get some help from exercise. If someone is overweight, losing weight may help. At first, exercise may make pain worse, but this does not mean that the hip is being damaged. It’s best to start with a small amount of activity and build up.

Non-steroidal anti-inflammatory (NSAID) tablets (such as ibuprofen or naproxen)
Most people with hip pain will have less pain in the first 3 months of taking NSAID tablets. These should be taken at the lowest dose that works for the shortest possible time, and usually with tablets to protect the stomach. People with some health conditions should avoid NSAID tablets. NSAID creams have fewer side effects, so they should be tried first. NSAIDs work better if you take them regularly instead of waiting for pain to get bad.

Opioids
People should only use weak opioids such as codeine if they cannot take NSAIDs, if NSAIDs have not worked well enough or have caused side effects. People should only use opioids for short periods as opioids can cause side effects and addiction. Guidelines recommend avoiding strong opioids, including tramadol, morphine and oxycodone.

Tests and scans
Usually a healthcare professional can diagnose someone from their symptoms and by examining them, so most people do not need tests or scans.

Understanding my treatment options
What does the evidence say about hip pain?

After a healthcare professional has diagnosed your hip problems, you can discuss these options with them to find out if they are right for you. If you have exhausted the choices listed here and want to discuss further options, please ask for Hip pain: thinking about a referral.

Some people’s hip problems may be caused by conditions that need other kinds of treatment. Your healthcare professional will explain options recommended by the National Institute of Health and Care Excellence, or NICE. This will help you make a decision together about what is best for you.
Sharing decisions

Please complete this section together with your healthcare professional.

- I would like to make some decisions today
- I would like to talk to my family and/or friends before making a decision
- I would like to make another appointment
- I would like to have more information

We agreed that:

I will:
...
...
...

My healthcare professional will:
...
...
...

I should come back to see a healthcare professional if:
...
...
...

If I have a problem or a concern, I should contact: (name and contact details)
...
...
...

I can find more information:
1. nhs.uk/conditions/hip-pain/
2. versusarthritis.org/hip-pain or call our helpline on 0800 5200 520
3. nice.org.uk/guidance/cg177/ifp/chapter/About-this-information
4. citizensadvice.org.uk or 03444 111 444
5. fitforwork.org

Local services I can access include: ...

This decision support tool was developed by Versus Arthritis with support from the Primary Care Centre Versus Arthritis at Keele University and funding from NHS England. For information on the evidence sources used, please contact content@versusarthritis.org