Pavlik harness for hip dysplasia

Patient information factsheet

We have given you this factsheet because your baby has been diagnosed with developmental dysplasia of the hip or ‘hip dysplasia’. We hope it will help to answer some of the questions you may have about using a Pavlik harness to treat hip dysplasia.

What is hip dysplasia?

Hip dysplasia is when a baby's hip joint has developed in an unusual way, either before they were born or later on. We do not know the exact cause of hip dysplasia, but it may be linked to breech delivery or to family history.

What is a Pavlik harness?

A Pavlik harness is a padded harness that holds a baby’s legs out to the side in a bent position. Its aim is to keep the hips in the right position to develop a normal hip socket (or ‘cup’) that will hold the femoral head (or ‘ball’) firmly in place.

We often use a Pavlik harness to treat hip dysplasia in babies under the age of four months. The harness comes in five different sizes.

Harness weights

<table>
<thead>
<tr>
<th>Size</th>
<th>Weight (grams)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extra small</td>
<td>90</td>
</tr>
<tr>
<td>Small</td>
<td>100</td>
</tr>
<tr>
<td>Medium</td>
<td>125</td>
</tr>
<tr>
<td>Large</td>
<td>150</td>
</tr>
<tr>
<td>Extra large</td>
<td>175</td>
</tr>
</tbody>
</table>

Although no parent wants to see their child in a harness, we strongly encourage you to persevere with this simple treatment. If your child does not wear the harness for the course of treatment now, their hips will not grow normally and they will need to have an operation when they are older.

Treatment plan

Treatment with a Pavlik harness usually takes about sixteen weeks.

For the first six weeks, your baby will need to wear the harness all the time. After this, we will gradually reduce their time in the harness.

<table>
<thead>
<tr>
<th>Weeks 1 - 6</th>
<th>Baby wears the harness all the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 7</td>
<td>Baby is out of the harness for one hour per day</td>
</tr>
<tr>
<td>Week 8</td>
<td>Baby is out of the harness for two hours per day</td>
</tr>
<tr>
<td>Week 9</td>
<td>Baby is out of the harness for four hours per day</td>
</tr>
<tr>
<td>Week 10</td>
<td>Baby is out of the harness for eight hours per day</td>
</tr>
<tr>
<td>Week 11 - 16</td>
<td>Night-time wear only</td>
</tr>
</tbody>
</table>

If your baby’s hip is slow to respond, we may need to delay their time out of the harness to make sure that the treatment works.
Pavlik harness for hip dysplasia

Check up appointments
Throughout the treatment, you and your baby will have appointments at the clinic every one or two weeks. At these appointments, we will check that the harness is fitting well and not causing any harm to your baby. As your baby grows, we will adjust the fit of the harness.

Caring for your baby with a Pavlik harness

Dressing your baby
You can dress your baby in a vest, preferably one with a collar, under the shoulder straps 1 and 2.

To change your baby’s vest:
1. Lie your baby down and loosen the chest band of the harness.
2. Undo strap 1 and take their right arm out of the vest.
3. Take the vest over their head and fasten strap 1.
4. Undo strap 2 and take their left arm out of the vest.
5. Remove the vest.
6. Once you have taken the vest off, you can wash your baby.
7. Take a new vest and put it on their left arm and over their head.
8. Fasten strap 2 and undo strap 1.
9. Take the vest over their right arm and fasten up strap 1.
10. Tuck the vest down through the chest band and secure.
11. Check that the shoulder straps are back on their markers and that the chest band is tightened up. You should be able to get four fingers between your baby’s chest and the chest band.

Feeding
If you are breastfeeding your baby, you can continue as usual. It may be helpful to place your baby on their side and then hold them to the breast.

Bed time
Check that your baby’s cot or Moses basket is wide enough to allow their legs to be outward, so that their hips are in a good position.

When putting your baby to sleep, always lie them on their back. This is the best position for their hip development. For short periods of time, you can place your baby on their front to encourage head control.

Cleaning the harness
If the harness is dirty, you can clean it by wetting it slightly, applying some detergent and scrubbing with an old toothbrush or nailbrush. Do not take the harness off until the planned time.

Once your baby is being weaned out of the harness, you can wash it by hand in warm water, or on a wool programme in a washing machine. If you have a tumble dryer, place the harness in a pillowcase and dry it on a low temperature setting.

Travel
Your baby should sit in an appropriate car seat for their age.

Sitting in a car seat will bring your baby’s legs forward, which is not the best position for the harness. Take a break on long journeys (after 90 minutes) and lie your baby on their back for a 30 minute break.

‘Hip safe’ slings or carriers should only be used when your baby is not wearing the harness. For more information about slings and carriers, please visit www.hipdysplasia.org
Possible complications

**Skin rubbing**
Check the skin regularly and apply a barrier cream.

**Femoral nerve palsy**
If your baby stops kicking fully when you take their leg out of the harness to wash, they may have temporary nerve damage (known as femoral nerve palsy). This is when the nerve in the groin becomes compressed and stops working for a short time.
To check your baby can kick their legs fully, remove one leg from the straps for a few minutes and then repeat with the other leg. Do this in the morning and again in the evening. Only one leg should be out of the straps at any time.

If this happens, contact our team of nurse practitioners, using the contact details below. We can simply remove the baby’s harness and replace it when the nerve recovers, which is usually within a week.

**Useful links**

www.hipdysplasia.org

STEPS: The National Association for Children with Lower Limb Abnormalities
www.steps-charity.org.uk
Email: info@steps-charity.org.uk

If you need a translation of this document, an interpreter or a version in large print, Braille or on audiotape, please telephone 023 8120 4688 for help.

www.uhs.nhs.uk/childrenshospital

**Contact us**
If you have any questions or concerns, please contact us using the details below:

**Advanced nurse practitioners (Julia and Liz)**
Telephone: 023 8120 4991 (Monday to Thursday)

**Nurse practitioners (Jan and Lucie)**
Mobile: 07584 402438 (Monday to Friday)

**Children’s orthopaedic ward (G3)**
Telephone: 023 8120 6486
Appointment rescheduling: 023 8120 5758
Research clinic: 023 8120 4989