

Some Practical Advice on
**Caring for your child in
a Hip Spica**

**Orthopaedic Nurse Specialists
Jenny Lind Children's Hospital**



Why does my child need a Hip Spica?

It is likely that your child has either injured their hip or is to have a surgical procedure. Hip spica casts are used to support, immobilise and protect the hip joint whilst it heals.

What is a Hip Spica?

A Hip Spica is a plaster which covers the child's lower limbs and abdomen. There are two main types of these casts, a one and a half-hip spica and a frog plaster.

One and a half hip spica

This is similar to the above plaster; the only difference is that one leg is plastered to the ankle and the other to above the knee.



Frog plaster

This plaster spreads both legs wide and goes down to both knees.



In all of these padding is applied next to the skin; over this are wrapped fibre-glass bandages or Plaster of Paris. These dry hard – immobilising the joint. Strips of pink tape are tucked under the edges around the groin area, to make it smooth and provide a waterproof covering of the edges of the plaster.

Care of the Hip Spica Cast

Cast care and skin care are closely linked. If urine or bowel movements are allowed to remain in contact with your child's skin e.g. such as under a wet or soiled nappy or beneath the edges of the cast, then nappy rash and subsequent skin breakdown is likely. It is uncomfortable and painful for the child and is also bad for the plaster. Frequent checks throughout the day will be necessary to make sure that your child's nappy is changed as soon as it becomes wet or soiled.

If a cast becomes damp from cleaning the skin or leakage from a nappy, the best way to dry this is to expose the damp area of the cast to air while your child is sleeping. First remove your child's nappy and leave an incontinence pad in place. A warm or cool hair dryer can also be used to dry the damp area applied for 10-15 minutes.

DO NOT use a hair dryer on the hot setting. The dryer should be held 10-12 inches from the skin and moved continuously over the area of the plaster and should **not** come into contact with the skin at all.

Skin and Cast Inspection

Check carefully beneath the cast edges morning and evening for any skin irritations, redness, blistering, open or draining wound areas, or pressure spots. A torch may be helpful to allow you to see underneath the edges of the plaster cast, particularly the sacral (tail bone) area.



DO NOT use any skin lotions, powders or oils under the cast or around the edges. Powders have a tendency to “cake” and lotions and oils will soften the skin, making it easier for the skin to break down.

Observe the cast for cracks, dents, softening, increasing tightness or looseness or drainage on the cast.

Do not allow your child to poke crayons, small toys or other small objects beneath the cast edges as they may cause pressure areas or skin breakdown.

Moving your child in a Hip Spica

Transfers

Small Children

It is recommended that only small children are lifted – if they are not then the provision of a hoist may be able to be arranged.

Carers frequently comment that handling their child in a hip spica is like handling a newborn baby, as they feel unsure where to hold the child in plaster. You will be given advice on how best to move and handle your child whilst in their hip spica plaster before you leave hospital.

Larger Children

It may be necessary for a hoist to be used to transfer larger children; you will be advised if a hoist is necessary for transferring your child. Your needs will be assessed by the Occupational Therapy (OT) team.

Mobility

Small Children

If you have a buggy, you will be asked to bring it into the hospital, to see if your child will fit into it with the hip spica on. Our nursing staff are able to provide advice on how to place your child safely and securely in your buggy when you leave hospital. However there are occasions when your buggy may not be suitable for your child in a hip spica. If your buggy is not suitable the nursing staff or OT's will advise you about the best way to transport your child.

Larger Children

We are able to advise where you are able to loan a wheelchair from if this is necessary..

Positioning in a Hip-Spica

Seating

Small Children

Children in hip-spicas, at best, look impossible to seat. However, there are various pieces of equipment which are available to assist the child to sit up.

This allows them to continue their development and education.

- A child's car seat propped against the sofa or wall.
- A small table or upturned strong box placed in front of them provides a good position to play or have their meals.
- Beanbags are extremely useful, as they mould around the child, providing support.
- A seat has been specifically made for children in hip spicas – called the STEPS Hip Spica Chair. It can be purchased from G & S Smirthwaite and sons. Tel: 01626 835552. On the STEPS web site there is a version you can make yourselves.

Larger Children

A reclining wheelchair with leg supports may be provided in the early stages of recovery. It may be necessary to use pillows and cushions in conjunction with the elevated foot rest to make your child more comfortable.

At home we recommend that you position your child on pillows in bed or in a reclining chair.



Lying Down

Because the knees are plastered in a bent position, children usually find it more comfortable if a pillow is placed under their knees, when they are lying on their back. It is important your child's heels do not rest on the bed as this may cause a pressure sore, a rolled up towel under the ankle leaving the heel free will help. Check the top of the spica is not pushing into either their tummy or back as this will cause them discomfort and could cause pressure sores.



Laying on their front is a good position for children to play in and in fact where ever possible children should lay on their fronts at least twice a day to relieve pressure on sacrum (tail bone), heels, shoulders and elbows. Use this time to check their skin condition carefully, especially their sacrum (tail bone). Protect their toes from touching the mattress when on their stomach by placing a pillow or rolled towel beneath the ankle.

This time can be used to check these areas wash and moisturise. If reddened areas appear near the base or top of the spine or on the heels, your child must stay on their stomachs for longer periods of time.

Your child will be able to play with their toys; read etc. on their front, sometimes a pillow or rolled towel placed under them is helpful.



Doing Everyday Things

Going to the Toilet

If your child is to wear nappies whilst in plaster, it is important not to allow the plaster to become overly wet/soiled as this will affect the strength of the plaster and cause the plaster to smell. It will be necessary to increase the frequency of nappy changes.

To put the nappy on, a small disposable nappy is used with the sticky tabs removed and tucked under the front and back of the plaster. To achieve this, lay your child on their back; tuck the nappy between the skin and the plaster at the front. Turn your child on their front or side and tuck in the rest of the nappy into the back of the plaster. Then a larger nappy is placed around the plaster to hold everything securely and lessen the chance of leakage!



If your child is older and uses nappies and larger nappies are supplied to you normally, contact your health visitor, school nurse or children's community nurse for advice.

If your child is toilet trained, they may be able to straddle the toilet or a commode may be provided if this is necessary. Often children are likely to require a carer to support them. Alternatively children can use a urinal and / or bed pans whilst lying on their bed.

To use a bedpan, elevate your child's head and shoulders with pillows when he/she is placed on the bedpan. This will help to prevent urine from running backwards inside the cast. A gauze or cloth pad or small folded towel placed on the back rim of a bedpan will absorb any moisture and help keep the cast dry. The pad is removed with the bedpan.

For girls, a piece of toilet paper can be placed on the groin area and used as a wick to direct urine into the pan rather than onto the plaster. Bedpans can be obtained, at a small cost, from the Red Cross. Tel: 01603 426 361

Bathing

Unfortunately, while your child is in plaster they will not be able to have a bath. You will need to give them a strip wash – ensuring the plaster does not get wet. If your child is small enough he can be laid on towels on the draining board of the kitchen sink to have a hair wash over the sink or on the floor on your lap with a washing up bowl and plenty of towels.

Dressing

With a hip spica, it is very difficult for a child to wear trousers etc. Trousers, shorts and pants, however, can be adapted to be worn by undoing the outer or inner seams and applying Velcro straps, press studs or ties.

Spicas are well padded as keep the child warm. In the summer it there will be little need for clothing over the spica.

There are some specialist suppliers of clothing for children in spicas but it is not necessary to spend money on these. You may find that there are a number of parents selling on clothing by going onto the STEPS Facebook forums. Socks to keep their feet warm are a good investment!

Play

The play specialists are available to offer play preparation and therapeutic activities to promote your child's continuing development and overcome any hospital related anxieties.

You will hopefully meet the play specialists at pre-assessment and they will show you around the ward. They will also be available on the ward to help you by providing activities and distraction whilst your child is an inpatient.

The Occupational Therapy team can also advise you on the best ways to keep your child active and involved in daily life. If your child goes to school/nursery/child minder we are happy to provide them with information and advice (with your permission).

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Travelling Home

Legal responsibility to use the correct child restraint in respect of children to the age of 14 years travelling in motor vehicles lies with the driver of the vehicle. This responsibility includes ensuring the safe transport of your child whilst in a hip spica. The hospital cannot provide children's car seats or other forms of restraint for use in motor vehicles.

Often smaller children in plaster will be able to sit in their own car seats by lengthening the shoulder and groin straps. Small children in full or one and a half hip spica casts may be able to straddle across a booster seat or a car seat with low sides, if they are of an appropriate age/weight.

You need to carefully consider where in the car your child is to be seated, whether in the front passenger seat or in the back. The depth of the seat and leg space has to be measured to ensure there is enough space. You also need to check where you are allowed to place your child in your car, for example if you have front air bags you are not allowed to place your child in the front passenger seat.

STEPS provides information and support for the provision of car seats. This can be found at- <https://www.steps-charity.org.uk/conditions/hip-dysplasia-ddh/hip-spica-car-seat/>

Advice and information, including current legislation regarding the safe transport of children, is available through RoSPA (Royal Society for the Prevention of Accidents).

Tel: 01212 482 000 or www.rospace.com

A car seat designed specifically for children with hip spicas is available to buy or hire from the In Car Safety Centre.

Tel: 01908 220 909

If your child is too big to utilise the above options or you do not have a car he/she will need to be transported in an ambulance to and from hospital whilst in a hip spica. This will be arranged by the ward when travelling home from hospital and by contacting the transport office at the Norfolk & Norwich NHS Trust for subsequent out patient appointments. Tel: 01603 289814

Life after Hip Spica

Following removal of the hip spica cast your child's skin will look scaly and dry but this will resolve once bathing has been reintroduced and a little moisturiser used. Most babies and small children will take a little while to get used to their freedom and then ease back into normal life. Your child's leg muscles may look smaller than before surgery but this will resolve as your child begins to move those muscles again. They may hold their leg in the same position as it was in plaster and it may take a few days or weeks to gain a normal range of movement. This is all quite normal and nothing to worry about.

Your consultant may want your child to use a removable type brace for a period of time after the spica has been removed. The amount of time over the day and how long they will need the brace are dependent on the surgery and your consultant will give you instructions about this.

Wheelchairs

For Children who are Temporary Wheelchair Users

Some children who need a Hip Spica have other health problems which might mean they will continue to need a wheelchair. For children without other health problems, you will get back to a normal life after a few months.

For Children who are Permanent Wheelchair Users

Some children, who already use a wheelchair, may take longer to gain mobility and return to their normal seating and may continue to need the use of the Nettie Wheelchair they have been temporarily provided with for some time after removal of their cast.

Once you are able to go back into your usual wheelchair, you will need to contact the wheelchair service to have the wheelchair checked, and if necessary, altered.

Please ring 01603 288 498 and explain that your child is having surgery and a post op wheelchair check is advised and someone will contact you and decide what is the best course of action.

Further information

If you require further information you can contact Sister or one of the Paediatric Staff Nurses on Buxton Ward **01603 287 405**

Once discharged from hospital you will have open access to the Jenny Lind Department. Call the Children's Assessment Unit at any time (24 hours) with any concerns you have regarding your child. Tel: 01603 289774

Alternatively contact Orthopaedic Nurse Specialists via switchboard on 01603 286286 asking for bleep 0298 or leave us a message on 01603 287266. We aim to get back to you within 2 working days

If you require further information on suitable equipment to purchase, a list is provided by STEPS (the charity for children with Lower Limb Abnormalities).

If you would like to discuss any of the issues raised with someone who has had experience, STEPS are very helpful and their contact details are below. They also have Facebook forums you can join to get help and advice from

Useful Phone Numbers/web sites

STEPS **01925 750 271**

www.steps-charity.org.uk

- For general information and financial assistance
- Facebook pages for support and peer advice

In Car Safety Centre **01908 220 909**

www.incarsafetycentre.co.uk

- For car seats

G & S Smirthwaite & Sons **01626 835 552**

www.smirthwaite.co.uk

- For Hip Spica Chairs

RoSPA **0121 248 2000**

www.rospa.com

- For car safety