

## THE IMPORTANCE OF A PROPER RECOVERY STRATEGY

The advances made in surgical techniques in recent years allow surgeons to treat hip conditions with increasingly less invasive procedures; in particular arthroscopy has been successfully introduced for select conditions. Whether or not an operation is performed with arthroscopy, the postoperative recovery period is always a very delicate time. Until a few years ago patients have to stay immobile in bed for several days. Nowadays they can get up and moving again quite quickly however they must follow some clear rules during postoperative recovery so as not to compromise the results of the corrective surgery. The system of muscles and ligaments is manipulated during the surgery and has been weakened so there is a high risk of luxation. In order to prevent this from occurring the patient must follow the surgeon's instructions very carefully. But how can we help the patient to avoid moving incorrectly by mistake? The area that has undergone surgery may also have oedema and the skin will have a wound which needs to be able to heal. This is why a postoperative hip brace needs to take into account all the factors involved in providing the most comfortable and effective postoperative recovery period possible.



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**REF. 91007 -**  
Optional rod  
for HipoCross

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# hipoCROSS

Lightweight hip brace

Code	REF. 91006 (HipoCross)			
	S	M	L	XL
Size				
Circumference pelvis cm	72/93	93/116	116/140	140/165
Circumference waist cm	65/84	84/109	109/140	140/170
Circumference proximal thigh cm	40/54	50/65	60/76	70/87

Right or left

### INDICATIONS

- Post-arthroscopy care.
- Postoperative care (compatible with the degree of stabilization required).
- Conservative treatment of hip dislocations.
- Arthrosis of the hip joint.
- Treatment of nonspecific persistent pain or inoperable joint misalignment.

### CONTRAINDICATIONS

Currently no known



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# hipoCROSS

Lightweight hip brace

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# THE THREE FUNCTIONS OF AN ADVANCED HIP BRACE

## OEDEMA PREVENTION AND CRYOTHERAPY

Immediately after a procedure the patient may have oedema around the operation site caused by joint manipulation or the saline solution used during surgery. The compression exerted by the hip brace helps to limit and contain any liquids seeping out. The hip brace also comes with a **cryotherapy gel**.

## NEW DUAL-FUNCTION ADDUCTION CONTROL

The adductor muscles commonly remain contracted following surgery and even with a movement as simple as walking the hip moves outwards which makes the leg adduct which in turn could cause luxation. The new and improved brace uses two types of control to protect the patient from straining the joint unintentionally: compression fabric and **straps** that cross over the trochanter provide **dynamic control**, while static control is ensured by the addition of the **new optional stay that can be easily adjusted with a screwdriver**.

## NEW DUAL-FUNCTION FLEXION AND EXTENSION CONTROL

As with adduction, flexing and extending the leg could potentially be risky for the patient. Marked flexion in particular could lead to luxation, such as sitting down after standing. Two types of control are also available for these circumstances: dynamic resistance is actually offered by the hip brace which provides proprioceptive feedback that "reminds" the patient to avoid extreme positions, while static resistance is ensured by the addition of the new optional stay with a polycentric hinge.



## AIRX FABRIC

HipoCross is designed to perform two functions simultaneously: provide compression and reabsorption of oedema while ensuring breathability so a surgical wound can heal correctly. AirX fabric is made by three-dimensionally weaving a polyester and elastane yarn to create a stretchy compression fabric that is also light and breathable.



## LATERAL AND ANTEROLATERAL SPIRAL SUPPORT STAYS

The stays keep the hip brace properly stretched out and flat to the body, preventing it from moving or any irritating wrinkles from forming in the fabric due to the robust tension exerted by the two straps.



## FRONT VELCRO® FASTENERS

The hip brace is easy to don as its side straps wrap around the patient's abdomen and pass over each other. The hip strap works in a similar way. Then all that remains to do is fasten the straps. This practical design makes donning quicker and easier, which is invaluable to the surgeon after an operation and also to the patient when he or she wishes to slip off the hip brace for personal hygiene reasons during convalescence. The brace is extremely easy to re-don as the fit and adjustments made by the surgeon remain unchanged.



## CRYOTHERAPY GEL AND POCKET

The patient can place the gel pack in the freezer to chill and then slide it into the pocket provided over the joint. The cold constricts the vessels beneath the gel pack and promotes the reabsorption of any liquid. The gel does not come into direct contact with the skin as it remains safe within the fabric pocket, and offers an easy, practical way to apply cold therapy.

## STRAPS WITH OVERLAPPING QUADRUPLE STRETCHY BANDS

Two sturdy straps that cross at the side over the trochanter have been specially designed to provide **dynamic adduction** control (and assist the stay in ensuring static control). Each strap is made up of four overlapping stretchy bands that provide four times more oppositional force than an individual elasticated band.



## REMOVAL-PROOF STRAPS

The ends of the two straps fasten respectively to the Velcro® areas in the lumbar region and behind the thigh. These are positioned by the surgeon immediately after the operation and should not be removed. This is why they have a special tab to prevent the straps from being undone accidentally.



## MOVEABLE COLOURED STRAP TIPS

The moveable ends of the two straps, which fasten at the front on the opposite iliac crest and on the thigh on the same side as the operation site, have coloured rubber tips that indicate the correct position (and therefore the right way to cross the straps): the orange tip on the iliac crest, and the blue tip on the thigh.



## THE NEW OPTIONAL STAY FOR STATIC ADDUCTION, FLEXION AND EXTENSION CONTROL

An extra stay may be added if the surgeon recommends static adduction control and/or static flexion and extension control. This new rigid stay attaches to the outside of the hip brace and simultaneously performs two functions.

**Static adduction control:** just adjust the hinge (positioned level with the trochanter) with a screwdriver and assist the leg into the desired degree of adduction. **Static flexion and extension resistance:** just set the graduated hinge to the desired degree of extension or flexion between 0° and 120°.

