Developmental Dysplasia of the Hip—Child

Developmental dysplasia of the hip (DDH) is a condition in which the hip joint does not develop normally during pregnancy, but it can also be present at birth. Finding DDH early can reduce long-term complications, but most of the time the condition goes away by itself. Early screening for DDH includes hip examinations at every well-baby visit with a doctor or pediatrician. The American Academy of Pediatrics recommends screening of children with risk factors or those whose physical examinations show abnormalities. Recommendations for imaging tests depend on a child’s age. In infants who are younger than 4 weeks, imaging examinations are not recommended. For children between 4 weeks and 4 months, ultrasound of the hips (https://www.radiologyinfo.org/en/info/us-hip) is usually appropriate if (1) it is unclear from physical examination if DDH is present or (2) there are risk factors for DDH. For children younger than 4 months with a physical examination that shows signs of DHH, ultrasound of the hips is usually appropriate. For children older than 4 months with a concern for DDH, x-ray (https://www.radiologyinfo.org/en/info/bonerad) of the pelvis is usually appropriate. Ultrasound of the hips is usually appropriate to monitor progress in children younger than 6 months with a known diagnosis of DDH who are being treated for their dysplasia by being in a special harness.

— By Anastasia Sumpaopol, BA, and Ryan K. Lee, MD, MBA. This information originally appeared in the Journal of the American College of Radiology.

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