

# Physician Forum

Excellence Above All

## **Jewish Hospital is now providing Anterior Approach total hip replacement through the medical expertise of Jonathan Yerasimides, M.D.**

As a leader in Orthopaedic medicine, Jewish Hospital is now providing Anterior Approach total hip replacement through the medical expertise of Jonathan Yerasimides, M.D. Dr. Yerasimides is a fellowship-trained orthopaedic surgeon, specializing in pelvis and acetabulum reconstruction, and is the only physician in Kentucky to provide this service.

The Anterior Approach is a minimally invasive procedure, which allows the surgeon to replace the hip joint from the front of the hip as opposed to side or back. This allows muscles to be left intact, which is needed for hip stability and shorter recovery time.

“More traditional hip replacement techniques cut muscle away from the bone, requiring a longer recovery time and strict precautions after surgery to ensure the artificial hip does not dislocate,” said Dr. Yerasimides.

Common dislocation precautions given to patients who have traditional hip replacements are:

- Do not flex hips beyond 90 degrees
- Do not cross your operated leg
- Do not bend over to pick up items off the floor
- Do not lie without a pillow between your legs
- Do not lie on the unoperated side
- Do not bend to put on socks, shoes, underpants or slacks
- Only use an elevated toilet seat

These precautions are not required with Anterior Approach hip replacement.

According to Dr. Yerasimides, “The Anterior Approach does not detach muscles, eliminating the need for dislocation precautions, accelerating rehab and reducing

hospital stay. Additional benefits to the patient include improved control of leg lengths, small incision, enhanced stability and fewer restrictions.”

With The Anterior Approach, the surgery is performed with the patient lying on their back, on an advanced surgical table specifically designed for this procedure. This table allows for the leg to be independently positioned, minimizing tissue damage and permitting X-ray imaging during surgery to measure leg length and implant position. “This ensures that every patient leaves the operating room with the artificial hip components most suited for their body,” said Dr. Yerasimides.

Therapists see patients during their hospital stay for gait training and functions of daily living. “Patients are typically discharged 2 to 3 days after surgery, once basic therapy goals are achieved,” said Dr. Yerasimides.

In general, additional therapy is not required, as walking and general activity is adequate. If additional therapy is needed, it can normally be provided on an outpatient basis.

“Again, there are no dislocation precautions after surgery.”

For more information about The Anterior Approach, contact Kim Hite, assistant vice president for orthopaedics at Jewish Hospital & St. Mary's HealthCare at (502) 582-7637.

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