



“Video Technique on Clinical Tests for DDH”: New-Born to Walking Age

Atul Bhaskar¹ · Chintan Doshi¹ · Taral Nagda¹ · Daksh Bhaskar¹

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Abstract

Introduction The early diagnosis of developmental Dysplasia of Hip (DDH) remains elusive. In the absence of symptoms, early signs need heightened awareness and an astute clinical examination.

Clinical Tests Every newborn child must be examined for hip instability by the Barlow and Ortolani tests. Periodic examination of the lower limbs for limb length discrepancy, restricted hip abduction, thigh or gluteal crease asymmetry must alert the examiner to rule out hip dysplasia. In a walking child with unilateral DDH the limp is obvious, and the Trendelenburg sign is positive. In bilateral DDH, limitation of hip abduction and waddling gait with increased lumbar lordosis are the only early discernible signs. Often the care-giver or parents notice the subtle changes of limb asymmetry and bring to the notice of the primary care doctors. These early signs must not be ignored to prevent late presenting DDH.

Conclusion This article highlights the signs of DDH that every clinician dealing with children must be well-versed.

Keywords DDH · clinical signs · Care-giver · Missed DDH

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Informed Consent For this type of study informed consent is not required.

Declarations

Conflict of Interest The authors declare that they have no conflict of interest.

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Ethical Standard Statement This article does not contain any studies with human or animal subjects performed by the any of the authors.

✉ Atul Bhaskar
arb_25@yahoo.com

¹ Children Orthopaedic Surgical Services, Apt 3/Bldg No 18,
Mhada Complex, Oshiwara Link Road, Mumbai 400053,
India