



Caring for your child with a hip spica

The advice in this leaflet should make parents and carers feel more confident in caring for your child when they are wearing a hip spica – a cast to help the hip to develop properly.

Toileting and nappies

- Care of the toileting area of your child's cast is important. Care is needed to make sure your child is comfortable and to keep the cast dry so it can work effectively. A hip spica will rarely be changed due to it smelling because of soiling and urine staining.
- Nappies need to be checked often (at least every two hours during the day and if possible every four hours during the night).
- Nappies need to be changed as soon as they are wet or soiled.
- Tuck a smaller nappy or sanitary or incontinence pad into the front and then the back of the cut out area. Cover with a disposable nappy to keep the plaster dry.
- Use a few drops of lavender or eucalyptus oil or Nil-Odour on the plaster if they develop a smell from urine or poo (use only tiny amounts so the plaster does not soften).
- If your child has loose poos or if you are having trouble keeping the urine from running under the plaster, cotton wadding can be used around the toileting area to help stop this. This will also need to be changed regularly. A wet spica is difficult to dry. Try leaving the toileting area open to air, or using a hair dryer on a cool setting only. Positioning your child with their head elevated above the level of their hips can also prevent urine or poo from soiling the cast. Positioning your child on his or her stomach with their nappy off will help to dry the back of the plaster if it gets wet.

Lifting

- When lifting your child, it is important to support them and the weight of the plaster. Do not lift them under the arms without supporting the plaster as well.
- Keep your child as close as possible to your own body when picking them up. This helps prevent straining your back and helps make your child feel secure.
- Cuddle your child in the same way as before they had a plaster, without fear of hurting them.

Positioning

- Children in a hip spica cannot move easily, so you will need to change their position often. Position changes are necessary to avoid getting sores under the plaster.
- Beanbags are very adaptable to sit your child in.
- Make position changes every two to four hours day and night, including at nappy checks.
- Position children on their back and on either side, using pillows or rolled up towels for support.

- Children can also be positioned on their stomach, supported by pillows, for short periods of time, **always under direct supervision of an adult.**
- Every time you change the position, check that the plaster is not digging in or too tight around the edges (tummy, ankles, groin and knees). This also includes when placing them in the car.
- Make sure your child's heels/feet can move freely after each position change. Ensure their feet are not pressed into the mattress/chair, which could cause pressure sores, especially when positioned on the stomach. Also, check the toes.
- If your child develops a reddened area on his or her back at the spine, he or she may need to spend more time on their stomach.

Bathing and hair washing

- **The hip spica is not waterproof so avoid getting it wet.**
- Use a bowl of water and a face washer (sponge bath) to wash your child in a hip spica.
- Do hair washing over the edge of a sink or bath with a jug. You will need the help of another person. One holds the child over the bath/ sink, the other washes the hair.
- Always make sure the plaster stays dry when bathing and washing hair.
- The first few 'baths' are the worst. You will feel awkward at first and the child apprehensive but practice makes perfect and you will be surprised by how easily you will both adapt. Some parents find it easier to leave hair washing until there are two adults around.

Feeding/diet

- Breastfeeding infants can and should continue to breastfeed. You may need to experiment with different positions to find one that suits you best.
- If your child is eating solids, instead of giving them three larger meals, you may need to feed them smaller meals more often because the plaster is tighter around the stomach.
- You should sit your child as upright as possible when feeding (probably in their pram or wheelchair), ensuring whatever chair you use, your child is well secured.
- Do not give your child new foods as this may cause loose poos (diarrhoea), soiling the cast.
- Encourage plenty of fruit, vegetables and fluids to help prevent constipation and to promote healing.

Clothing

- Your child will probably need to wear larger clothing so it can fit over a hip spica.
- Smaller children may only need a T-shirt or jumper and socks.
- Pull the socks up over the plaster so they are not tight around the ankles.
- Larger children can be dressed in pants that have been altered with velcro or press-studs down the side to fit over the plaster.
- Underwear for older children can be altered with velcro, press-studs or ties on the sides.

Skin care

- Check the skin around the edges of the plaster every day for redness, blisters, pressure areas or skin irritations.
- Your child will continue to grow with a hip spica on, so check regularly to make sure the plaster is not too tight.

- Only use powders and creams on skin that you can see. Do not put any powder or cream under the plaster because this can cause skin irritations.
- Be sure your child does not poke things down the plaster. Items poked down the plaster can cause skin grazes and may become stuck.

Entertainment

- Your child will adjust to being in a hip spica very quickly and should continue with their regular routines.
- Place toys within easy reach.
- Frequent scenery changes will help with boredom.

Transportation

- It is illegal for your child to travel in a car unrestrained. You may need to get the next size up in car seats.

Follow-up

- Your nurse will tell you when your follow up appointment will be.

Key points to remember

- Hip spicas are not waterproof and should never be placed in water.
- Nappies should be changed as soon as they are wet/dirty to help keep the cast clean and dry.

Contact the ward or the children's Orthopaedic Nursing Team if:

- You notice any sores or blisters on the skin under the edges of the cast;
- Your child has a high temperature which cannot be explained by a cold, ear infection or other illness;
- There are cracks, breaks or softening of the plaster;
- The cast is causing irritation and redness for a long time and you are not sure why;
- Your child's toes are bluish, reddened, swollen, very hot or very cold;
- There is an unusual odour/smell from the plaster which cannot be explained by soiling;
- The cast has become too tight.

Contacting us

If you require any further advice, please contact:

Angie Lee, Nurse Consultant: 0118 322 8747

Nina Baker, Clinical Nurse Specialist: 0118 322 8746 or 0118 322 5111 bleep 232

CAT 5 (Clinical Administration Team) 0118 322 7415 or email rbb-tr.cat5@nhs.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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