Regional Anesthesia for Hip Replacement

Type of Anesthesia
There are two main types:

- Regional
- General

Our surgeons strongly prefer that you have regional anesthesia if you can.

Regional uses a shot of medicine to numb part of your body. Hip replacement is often done this way. You could have a spinal or an epidural or combined spinal-epidural.

- **Spinal:** We inject numbing medicine into the fluid around your spinal cord.
- **Epidural:** We inject numbing medicine through a small tube close to your nerves.

Both work in the same way as numbing medicines that the dentist uses. You will feel numb below the waist from the spinal for 2-4 hours. An epidural can be used if you will need numbing medicine for more than 2-4 hours.

General anesthesia is used if regional is not the best option for you. You will be fully asleep and have a breathing tube. At the end of surgery, we take the breathing tube out and wake you up.

On the day of surgery, after you check into the preop area, your anesthesia doctor will talk with you about the pros and cons of both types. You and your doctor decide on the best option for you.

Regional Anesthesia Process
The spinal or epidural is done while you sit up or lay on your side. You may get medicine to help you relax when it is being placed. The process is:

1. Your back is cleaned with germ-free soap.
2. We place a numbing medicine in your skin where the needle will go.
3. We insert the needle gently into your back. With a spinal, we inject the numbing medicine, and all equipment is removed. With an epidural, a small, plastic catheter is placed (this catheter is about the width of a guitar string). You should feel very little pain during this step.

Sedated During Surgery
It is normal with regional anesthesia for you to be sedated during surgery. You should not feel any pain because you will be numb. Most patients remember very little with sedation. They wake up faster and feel less groggy than with general anesthesia.

Risks
Although it is very safe, there is a small risk of problems.

Common Risks

- Shivering
- Itchy skin
- Tender back

Other Risks

- A drop in blood pressure.
- Numbness to only one side of your body.
- A “spinal” headache (1 out of 100 patients). This type of headache gets worse when you sit up and better when lying flat. These headaches can be severe, but we can treat them. They have few long-term side effects.
- Infection or bleeding around the spinal cord (rare).
- Nerve injury/numbness/weakness (rare).
- The epidural can be placed into blood vessel (rare) which can have serious effects on heart rate, rhythm and breathing.

Who should not get regional anesthesia?

- Patients with bleeding problems.
- Patients with severe infections.
- Patients who have had nerve injuries.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person’s health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 11/2026 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7346