

GETTING TO KNOW YOUR RHINO

The Rhino Cruiser Hip Abduction brace has been prescribed for your baby or toddler to keep the hip joints in a position of abduction and flexion, like frogs legs.

This position encourages the ball of the joint to sit into the socket. This allows the development of the shallow part of the socket (acetabulum) and the strengthening of loose ligaments.

Infants are able to roll, sit, crawl and toddlers can actually walk in the brace.



DEVELOPMENTAL DYSPLASIA OF THE HIP (DDH)

DDH is an abnormal development of the hip joint. The ball at the top of the thigh bone (femoral head) is not stable within the socket (acetabulum). The ligaments of the hip joint which hold it all together may also be stretched and loose. DDH can be in one or both hips. Pregnant women secrete hormones in their bloodstream, which allows their ligaments to relax. Some of these hormones enter the baby's bloodstream and can make their ligaments relaxed as well. This can make the hip joint loose in the socket. DDH is more common in girls, firstborns, families where a parent has had DDH or if an unborn baby is in the breech position (feet down position in the uterus), this can put the legs in a position which increases the risk of DDH.



FITTING THE RHINO

To apply the brace:

- 1) Lie the baby on their back and lift up the legs (from beneath the bottom) to slide the brace underneath their bottom.
- 2) Once the brace is roughly in position, making sure the crossbar is as close as possible to the baby, fasten each thigh into the brace using the Velcro straps. The foam padding should wrap around the thigh and tuck tightly into the back of the brace.
- 3). The straps should be then done up firmly around the thigh. The waist strap should be then fastened with about three fingers under the strap whilst doing up the Velcro (This allows some room under the waist strap so that it is not too tight for sitting, eating and inhaling).

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WASHING THE RHINO CRUISER

The plastic is easily cleaned by wiping down with a warm wet cloth or antiseptic wipe. The foam can also be wiped over thoroughly with an antiseptic or baby wipe. You could use your baby's shampoo to clean the brace with the assurance it won't irritate the skin. Straps can be hand washed using a mild soap and warm water.

RUBBING OR IRRITATION

Occasionally some skin problems or irritation will occur. Most commonly behind the knees or if the brace is in direct contact with the skin. Firstly, ensure your child has leggings or pants on to stop rubbing on the skin. Also ensure there is a layer of clothing under the waist strap. Occasionally, pressure occurs on the lower back due to the lumbar curve of the brace. This is generally relieved by elevating the bottom and legs by placing a folded towel or blanket underneath when they are lying on their back. If this back pressure continues please try to encourage tummy time or sitting. Any skin irritation must be brought to the attention of your Orthotist for advice or modification of the brace.

HOW WILL MY BABY FIT...

In the car seat? This can be difficult with infants over six months in abduction braces. If the car seat cannot be adapted safely for use then the brace must be removed for car trips.

In the capsule? This can be difficult with larger infants in abduction braces. If the child does not fit comfortably in a capsule the brace may be removed (ensuring the child still gets their allocated treatment hours in the brace) or the child should be carried in an alternative way. You may also benefit from moving your child into a regular car seat earlier than anticipated.

Into clothes? Stretchy, larger sized pants/leggings are the best option, gather the material through the crotch to allow the hips to open. Be careful the brace is not so tight that creases in the pants cause discomfort.

SLEEPING DIFFICULTIES

Your infant may take 2-3 nights to settle into the brace and become comfortable enough to sleep well. Occasionally children will feel insecure as their feet are "floating" above the bed or blanket. In this case fold a blanket or towel and place behind / under the legs (not the bottom) to lift up the legs and take the strain off the inside of the knees. Perseverance is important but the reality is that taking it off after 2 hr of crying is not unacceptable. As long as they are wearing it more every subsequent 24hr period.

If you have any queries or problems please call your child's orthotist on 1300 866 275