



SLIPPED CAPITAL FEMORAL EPIPHYSIS (SCFE or SUFE)

A slipped upper femoral epiphysis (SCFE) is a condition involving the hip joint. The hip joint works as a ball and socket. The very top of the femur (thigh bone) forms the ball (also called femoral head), and beneath this ball lies a growth plate (an area of growing tissue that allows the bones to lengthen, also called the growth plate).

In some children the growth plate may be weakened and this can cause it to allow the femoral head to slip. The most common age for this to happen is between 10-15 years.

The exact cause of this condition is not known, but it is often linked to increased weight and may be linked to puberty hormones. A SCFE is not usually associated with an injury.

It is important to get an early diagnosis and treatment before the slip gets worse. Treatment always involves surgery.

Signs and symptoms of SCFE

A child with SCFE may feel like they have pulled a muscle in the early stages and often symptoms develop slowly but may worsen suddenly in severe cases.

- pain may be felt in the hip, thigh or knee – sometime the pain is only felt in the knee
- limping or holding leg in odd position
- reduced movement of the hip

Should I see a Dr?

If your child has groin, hip thigh and/or knee pain then you should see your GP

If your child has all of the symptoms of SCFE then make sure they do not put weight through the leg and go to the Accident & Emergency department.



The diagnosis of SCFE is usually made by physical examination of hip movement and an X-ray but sometimes further imaging such as an MRI may be required.



Treatment for SCFE

In all cases the treatment will involve surgery. It is important that until that point your child does not bear weight through the leg so should use crutches or a wheelchair.

The type of operation will depend on how far the hip has slipped but most procedures will involve putting screws into the head of the femur to prevent further slip occurring.



The operation will require your child to be asleep (general anaesthetic). The opposite hip may also need an operation to prevent that one slipping as the condition can occur on both sides. Your orthopaedic surgeon will discuss the procedures with you. The screws may need a further operation to remove them in the future.

Your child will need to spend a few nights in hospital until they are comfortable and can get around safely. One parent will be able to stay with them.

Care at Home

Your child will have a wound on the side of their leg covered by a dressing. Keep this dry and clean. Nurses will be able to advise you and be sure to ask if you are not sure.

Contact the hospital or your GP or nearest Accident & Emergency department if your child's wound appears to be infected. An infected wound is often red and oozing. It may smell. Your child may also have a fever.

Most children will need some regular pain relief and this will be discussed with you before discharge.

Your child will need to use crutches or a wheelchair for about 6 weeks after surgery. The surgeon will advise you when return to activities. The follow up plan will be discussed with you also but an outpatient appointment will be made between 2 & 6 weeks after surgery.