

Jack's Timeline

Winter & Spring, 2008	Every so often (6 - 8 weeks), Jack's knee would swell up. It was not always the same knee and he couldn't pin point why it happened. After icing for a few days, it got better
August, 2008	After a family BBQ where Jack was running and jumping for 8 hours straight (not an exaggeration!), his left knee swelled up. We were away from home and did not have a good ice pack. It took longer for his knee to get better this time. Soon after his knee got better, he started soccer. After the first practice his left knee swelled up again.
September, 2008	In early September, we took Jack to his pediatrician who immediately sent him for a Lyme's test and also put Jack on 2 weeks of Amoxicillin. The Lyme's test came back positive. At the end of the 2 weeks of Amox. Jack's knee was still swollen so he continued another 2 weeks of Amox.. (Lyme's note: we had not seen a tick or rash on Jack)
Fall, 2008	After 4 weeks of Amox., Jack's left knee was still swollen. In addition, for a few days in October, his right wrist was swollen. The pediatrician then referred us to a rheumatologist. There, Jack was put on Naprosyn, 1 teaspoon twice a day for swelling and pain, and 4 weeks of Doxycycline.
Thanksgiving, 2008	By Thanksgiving, Jack's knee was better, but he began limping and saying his left hip hurt. When undressed, his left hip looked to be sticking out. Right after Thanksgiving, the rheumatologist sent Jack for an xray of his hip. The radiologist who reviewed the xray said the hip xray was within normal limits. We were then advised to 'wait and see' how Jack felt.
Christmas, 2008	Through December, Jack did appear to be feeling better. He was not limping and he was even running when we travelled to Florida over Christmas break.
New Years weekend, 2009	On New Years Eve, Jack came down with a stomach virus. All of New Years Day, he spent on the couch. The following day, he could barely walk - he had a pronounced limp and it was painful to walk. That same weekend, his sister sprained her foot. So, while she was being examined by an orthopedic, I had him xray Jack's hip. The second he looked at the xray, he said it was Perthes and referred us to Dr. Solga of University Orthopedics in Providence.
Winter & Spring, 2009	Through the winter and spring, Jack was on crutches, and partial weight bearing. He began physical therapy 2x a week in Providence. He also began swimming 2 or 3 times a week to keep ROM and the strength in his left leg. Instead of Naprosyn, he was put on 200 mg of Advil, 2x a day.

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May, 2009	At a check-up in May with Dr. Solga, she felt his hip was very stiff and his xray did not look promising (the head of the hip was not contained in his socket). It was decided that Jack should have dye injected into his hip so she could really inspect it, and if need be, surgically release the groin muscle. This would be followed by 6 weeks of traction
June 30, 2009	Jack went in for the procedure outlined above on June 30th. Dr. Solga said the covering of the head looked good and he also had good enough ROM that she did not need to release the groin muscle.
Summer, 2009	6 weeks of traction followed the above procedure. Jack's legs were at a 30 degree angle with 4 lb weights attached to keep his legs elevated. After 9 days straight, he got the OK to go swimming every other day. When he was out of traction to go swimming or go to the bathroom, he was completely non-weight bearing on his left leg. After 6 weeks, his hip was xrayed again. Although his ROM was better than in May, the xray still showed that the head was not contained. It was decided to keep him non-weight bearing, keep him in traction as much as possible and have him attend school in a wheelchair. He also continued to swim 2 or 3 times a week. Full details of his summer are at: firecrackerflyers.typepad.com/summer_archives
Fall, 2009	At his mid-November appt, his ROM was excellent but his xray still showed no containment improvement. It was decided that Jack could start walking a little bit at home. At school, he continued to be non-weight bearing because he needs to be monitored when walking. He still continued to swim 2 or 3 times a week.
January, 2010	He walks very well at home and claims his hip rarely hurts. He plays a lot at home on his knees and says that does not hurt at all. At school he is still non-weight bearing and he still continues to swim 2 or 3 times a week. I also only give him 200 mg of Advil in the morning. For the past month, he has not seemed to need the Advil at night very often.
January 27, 2010	We went to Boston Childrens Hospital for a 2nd opinion on Jack's hip. This doctor thinks surgery to hold the hip in place while the ball of the hip grows back would be a good idea. The doctor presented Jack's case to 2 other orthopedic surgeons and they each had a different surgical procedure they would use. 1) Femoral Osteotomy; 2) Shelf Plasty; 3) Perform both procedures at once

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February 13, 2010	Jack's regular orthopedic doctor agreed with surgery option #3 - femoral osteotomy and shelf plasty. This will be done on March 2nd and will be followed by 6 - 8 weeks in a hip spica cast. This body cast will extend from his armpits to his ankle on his left (bad) leg and just above the knee on his right leg, with a bar holding his legs in a straddle.
March 2, 2010	Jack undergoes a femoral osteotomy. When the osteotomy was finished, the doctor determined that his hip socket looked good and so she did not perform the shelf plasty. Full details of the surgery are at: firecrackerflyers.typepad.com/hospital_archives
March 5 - April 23, 2010	Jack recovers at home in his body cast.
May, 2010	Jack has physical therapy twice a week and swims 3 times a week. He is mostly on crutches and in his wheelchair, but at home he crabwalks and scoots around on his bottom. Each day his legs get stronger and after only a few weeks, he can take some steps on his own.
June 4, 2010	6 weeks after getting out of the spica cast, Jack has a follow-up appt. with his orthopedic doctor. He gets the green light to start walking more and we can begin to wean him off his crutches. This summer, he can ride a regular bike and do some light activities, such as golf.
July 4, 2010	By the Fourth of July, Jack is off crutches completely. He can run a bit and play out in the yard. His leg tires easily but after a short rest, he is able to walk and run a bit again.
August 20, 2010	Jack has a follow-up appt. with his orthopedic doctor. Since his leg continues to get stronger and he has no pain in his hip, she removes his restrictions for school. He can participate fully in gym class and at recess.
Fall, 2010	Jack continues to swim once a week, ride his bike, run and play out in the yard with friends, and participate normally in gym class and recess. He plays soccer at recess and never has any pain in his hip. His leg occasionally gets tired but not very often, and when it does, it only takes a short rest (less than 5 minutes) to recharge it.