

Slipped Capital Femoral Epiphysis (SCFE)

What is slipped capital femoral epiphysis?

Slipped capital femoral epiphysis (SCFE) is a hip problem that starts if the epiphysis (growing end) of the femur (thigh bone) slips from the ball of the hip joint. SCFE may develop in one leg or it may occur in both legs.

Who gets SCFE?

SCFE usually affects children between the ages of 8 and 15. SCFE often affects children who are overweight. More boys than girls get SCFE, and it's more common in blacks than in whites. Doctors don't know the exact cause of SCFE. SCFE is typically divided into 2 types: stable and unstable.

What's the difference between stable and unstable SCFE?

A child is considered to have "stable" SCFE if he or she can walk with or without crutches. More than 90% of cases of SCFE are stable.

A child who can't walk, even with crutches, has "unstable" SCFE. Unstable SCFE often happens after a trauma, such as a sports injury or a fall. Falling can also cause a stable SCFE to become unstable.

What are the symptoms of stable SCFE?

A child who has stable SCFE may first have stiffness in the hip. The stiffness may get better with rest. After a while, the stiffness may turn into a limp, and the child may have pain that comes and goes. The pain is often felt in the groin, the thigh or the knee, and not necessarily in the hip itself.

In the later stages, the child may lose some ability to move the involved hip. This leg will usually twist out. It may look shorter than the other leg. He or she may not be able to play sports or do simple tasks such as bending over to tie his or her shoes. The symptoms may change gradually or rapidly.

What are the symptoms of unstable SCFE?

A child who has unstable SCFE has extreme pain. The pain is similar to what might be felt with a broken bone. The child probably won't be able to move the injured leg. If you think your child has unstable SCFE, don't force the leg to move. That could make the thigh bone slip even more.

How can the doctor tell if my child has SCFE?

To check for stable or unstable SCFE, your doctor will want your child to get x-rays that show the pelvis and thigh area from several angles. Your doctor will then decide which tests are needed and explain each test to you.

How is SCFE treated?

Once SCFE is diagnosed, your doctor will probably refer your child to an orthopedic surgeon (a doctor who fixes bone problems). Surgery is usually the treatment of choice. It's important to get treatment right away.

The most common treatment of SCFE is called "in-situ fixation." With this treatment, the bone is held in place with a single central screw. This screw keeps the thigh bone from slipping and will close the growth plate. The results of this treatment are good. It has few complications.

Other surgical treatments (including in-situ fixation with more than one screw) are used less often. Ask your doctor to explain the potential benefits and risks of the treatment options.

What are the complications of SCFE?

The most serious complications of SCFE are avascular necrosis (a lack of blood flow to the bone) and chondrolysis (decay of cartilage). Avascular necrosis is more common in patients who have unstable SCFE.

The risk of these complications increases as the severity of SCFE increases. This is why it is important to get treatment right away.

When can my child get back to normal activities?

Getting better takes time. For 4 to 6 weeks after surgery, your child will need to use crutches to walk. Then your child can slowly get back into normal activities, possibly including running and contact sports.

Will my child recover completely?

If SCFE is caught early, there is a good chance for full recovery, especially if SCFE is stable. Some children who have had SCFE may get arthritis in the hip later in life.