

# Slipped Capital Femoral Epiphysis (SCFE)

Slipped capital femoral epiphysis (SCFE—often pronounced “skiffy”) is a common hip problem in teenagers. The top of the immature thigh bone (the femur) slips partially off the ball of the joint. If your child has SCFE, he or she may need surgery to stabilize the bone.

## What is slipped capital femoral epiphysis (SCFE)?

In SCFE, the ball of the joint (the capital femoral epiphysis) slips so that it no longer sits in the correct position on top of the thigh bone. The ball remains in the hip socket. The severity of your child’s symptoms depends on how severe the slip is.

Because it affects growing bone, SCFE almost always occurs in young adolescents. It is more common in boys than girls and often occurs in teens who are overweight. Treatment is needed to restore the normal joint and prevent complications of the hip.

## What does it look like?

In most teens with SCFE, the slip is *stable*: although the ball has started to slip off the top of the joint, it is still well attached. Your child with stable SCFE may have:

- Mild discomfort at first.
- Hip pain that increases as the slip gets worse. Sometimes knee pain is the main symptom.
- The child can walk on the leg, although usually with a limp.
- Limited hip motion.

In other children, the slip is *unstable*: the ball is no longer firmly attached to the top of the thigh bone. In unstable SCFE:

- The slip usually occurs suddenly.
- Pain is severe; your child may suddenly collapse.
- Your child may be unable to walk or to put any weight on the leg, even if it is supported.
- Hip motion may be very limited and painful.

## What causes SCFE?

- The exact cause of SCFE is unknown. Hormones may play a role, because SCFE often occurs in children with

growth disorders or other hormonal diseases. Children who develop SCFE before puberty (age 10 or younger) may be more likely to have hormonal diseases, especially hypothyroidism (low thyroid hormone levels).

- Being overweight is probably a contributing factor.
- Trauma or sports injuries sometimes lead to SCFE. However, there is often no obvious injury.

## What are some possible complications of SCFE?

Serious complications of SCFE are possible:

- Osteonecrosis (sometimes called avascular necrosis): If the blood supply to the ball of the hip joint is reduced, the bone may die.
- Chondrolysis: Loss of the cartilage of the hip joint.

If complications occur, or if pinning to repair the damaged bone is unsuccessful, more surgery may be needed.

## What puts your child at risk of SCFE?

- It usually occurs in the early teens: 13 to 14 years in boys, 11 to 12 years in girls.
- The risk is higher in boys than in girls.
- The risk is higher in African Americans than in whites.
- Being overweight is a major risk factor: most teens with SCFE are obese.
- SCFE may run in families.
- Hypothyroidism (low function of the thyroid gland).
- The risk is higher in children with certain medical problems, including kidney disease or treatment for cancer.

## How is SCFE treated?

- X-rays are performed to confirm that your child has SCFE and to see how severe it is.
- If SCFE is present, it is important to keep weight off the affected hip as much as possible. Your child should start walking with crutches immediately. A visit to a bone and joint specialist (an orthopedic surgeon) will be recommended by your doctor as soon as possible.
- The most common treatment for SCFE is to place one or two pins through the bone to repair the slip.



### **When should I call your office?**

- Call our office if your child develops hip pain, especially if it is severe.
- Call your orthopedic surgeon if your child has increased pain after a procedure to treat SCFE.