

# **Helping Hand™**

Traction: Bryant's

Bryant's traction is used for developmental dislocated hip(s) (DDH). In Bryant's traction, the child's body and the weights are used as tension to keep the end of the femur (the large bone that goes from the knee to the hip) in the hip socket. Traction will help position the top of the femur into the hip socket correctly (Picture 1).

Your child needs traction for:

Developmental dislocated hip(s) (DDH) -
Your child's hip bone(s) do not stay in proper
position. The femur slips out of the hip
socket (Picture 2, page 2). Traction helps
keep the top of the femur in the hip socket.
Refer to the Helping Hand: Developmental
Dislocated Hip (DDH): Home Traction Care,
HH-I-146.

☐ Other:	

With Bryant's traction, the legs are wrapped with strips of adhesive tape (moleskin) attached to a gauze adhesive elastic bandage (Elastoplast), then more moleskin and Elastoplast, then connected to

ropes and weights. The bandage and weights do not hurt the child.

#### Your Child's Care

- Your child may be in traction for several weeks.
- Every 2 to 4 hours the nurses will check your child's circulation and nerve function in the feet and toes. They will check for swelling, pale or blue coloring, temperature of the skin and movement.
- The nurses will also check regularly for redness, flaking, swelling and blisters.
- From time to time gently squeeze the legs. If there is no tenderness, there are probably no skin problems with the traction and you may not need to have the traction changed.

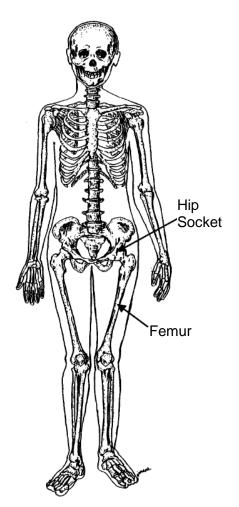
Traction: Bryant's Page 2 of 2

# **Preventing Injury to Your Child**

- Let the weights hang freely. They should not touch the bed.
- Keep all blankets and sheets away from the traction ropes.
- The nurses will give you special instructions for feeding your child to help prevent gagging or choking.
- Keep the side rails up and locked at all times so the child does not fall out of bed. (You may put the side rail down if you are right next to the child's bed.)

# **Activity**

- You can take part in your child's care, including feeding, cuddling, playing and changing diapers. Try to treat your child as you did before the traction.
- Since your child must stay in bed, try to plan enjoyable play activities. Nationwide Children's Hospital staff will help you.
- Encourage family and friends to visit your child.
- Bring pictures of family, friends and pets for your child to enjoy.



**Picture 2** The skeletal system inside the body.

# **Going Home**

Some children continue traction at home and others are placed in a cast before they go home. Your child's doctor will discuss with you the best treatment for your child. When your child no longer needs traction, the weights and tape will be removed.

If your child has a cast, you will be given cast care instructions before you leave the hospital.

Refer to the Helping Hands: *Cast Care: Hip Spica or Body Cast*, HH-II-14, and *Circulation Checks*, HH-II-60.

If you have any questions, be sure to ask your doctor or nurse.