Orthopaedic Connection

Do You Need a Woman’s Total Knee?

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I wrote an article several months ago specifically about knee arthritis in women. I pointed out that there are certain aspects of knee arthritis and surgery in women that are distinctly different from men. I do see a lot more women with knee arthritis than men.

Gender Specific Total Knee

Perhaps for the reason that there are a larger number of women with knee arthritis, one of the Orthopaedic companies developed a Total Knee Replacement specifically designed for women. We are told that there are important differences in the bony anatomy of a woman’s knee.

I can see where it would sound reasonable to women patients and even physicians and others in the health care field. “This is an important new advance in joint replacement surgery. A novel and exciting new breakthrough. Why didn’t someone come up with this before?” – or so we are told.

I wondered about this a lot and reviewed what I had been doing and talked to a lot of people who have even more knowledge than I do.

I have never encountered a patient, male or female, in the operating room that I didn’t have the right size prosthesis available. There are an imposing array of sizes in the LCS prosthesis that I have used for years.

Nevertheless was I missing something?

Research

I recently attended the largest, most important Orthopaedic Surgery meeting in the world; the annual meeting of the American Academy of Orthopaedic Surgeons. At the meeting there was an exhibit presented jointly by West Virginia University and the University of Michigan. Exhaustive study of female knee joints concluded that there are very slight differences in their knee joint anatomy compared to men.

The study found no meaningful differences between male and female knees that can justify separate implants. The study concluded that the claims about the existence of important differences between the sexes are nonexistent or exaggerated. Furthermore there is no evidence in the
literature that females have worse outcomes than males after traditional total knee replacement.

Conclusion

Despite the lack of scientific evidence of the need for an implant made specifically for females, an implant company has aggressively marketed it to patients and surgeons.

Direct to consumer advertising of orthopaedic devices is an area of concern. Its purpose in this case is to sell products. The advertising appeals to emotions and uses marketing tactics to influence the medical decision making process. Patients expectations affects the exchange between doctor and patient and I believe has an adverse affect on patient care.

It is clear that there is no scientific evidence supporting the need for gender specific implants. However, women are led to believe that there are proven differences that require different implants. I believe this is misleading and contrary to American Academy of Orthopaedic Surgeons guidelines for direct to consumer advertising.

For more information about Total Knee Replacement check out our office teaching website, www.orthopodsurgeon.com which can take you also to Your Orthopaedic Connection.

Our goal is simple - To help people return to more pain free, functional lives.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush