Knee Trouble is one of the most common problems we see in the office. Family physicians see a lot of people in their offices with knee problems, too. It seems like we see more than we used to in patients of all age groups.

Why this is I’m not sure, but the origin of the problem is not what I wanted to tell you about.

It is important to tell you how a person with a knee problem is evaluated from an x-ray standpoint.

You already know that in examining any orthopaedic problem, careful history and physical exam are the most important steps. While we usually do x-rays when dealing with knee problems, we are talking about plain, ordinary x-rays that have been around for decades.

These are the most important things to do after taking the history and doing the exam. Plain x-rays please. Not MRI! Hold the MRI!

Why do I say this? Am I old fashioned? Don’t like new technology? No, it’s just the correct way to do things.

Most patients and sometimes non orthopaedic doctors think the MRI has replaced plain x-rays, because on MRI you “can see a lot more”.

But you don’t always have to see a lot more. Plain x-rays alone often give the answer and an MRI adds nothing to the evaluation. You would not believe how many patients I see who have had an MRI first and never have had a plain x-ray of the knee! Groan.

MRI does however add a huge cost to the overall evaluation, at least 10 – 15 times as much as plain x-rays. The MRI is also uncomfortable and difficult for patients who are having pain. It is non invasive and you are not exposed to radiation at least. So at least it can’t hurt you.

MRI is wonderful and has a proper place in diagnosis. However, it has become so well known and appealing as a major new technology that our patients often think they didn’t get good care if an MRI isn’t done. I guess in this way I am trying to help patients understand that you can have good care without an MRI. It is up to me as an Orthopaedic Surgeon not to
over use tests just because they are popular and my patients want the “newest technology”.

I don’t mind at all when patients come to my office and have had no x-rays of any kind. That gives me the most freedom in choosing what a particular person needs.

From an x-ray point of view it may or may not include an MRI study. Articles have been written that we as a country are the most imaged (x-rayed) people in the world. Many times MRIs add nothing to correct diagnosis of a knee problem. It does drive up the cost of medicine though, which is a shame.

So if I tell you, that an MRI isn’t needed don’t think I don’t know what I am doing. A lot of thought went into it and I do know if you need it!

Check out our office teaching website for patients and families at www.orthopodsurgeon.com for lots of further information about all the things I deal with in the office and hospital.

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