

Orthopaedic Connection

Surgery for Knee Arthritis

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Transforming patient information into patient understanding.

This is a pretty big topic, but I have to start somewhere. I'd like to give you a complete picture so the information may run over into next week.

It comes down to surgery if the conservative non-surgical options have not been effective to relieve a patient's symptoms and they feel they need to have more done.

Arthroscopic Surgery

Arthroscopic surgery has evolved over many years. At first we as Orthopaedic Surgeons only looked into the joint and made a diagnosis. Then the surgery gradually evolved into actually being able to do surgery of various kinds in the joint.

People with arthritis in the knee present their own special challenge. The more advanced your arthritis is, **the less effective arthroscopic surgery will be**. People with arthritis can be having their symptoms in part from torn cartilage and perhaps some "loose" pieces in the joint. Arthroscopic surgery can help these patients without question. The problem is way too much arthroscopic surgery was done on people whose arthritis was too bad to be helped by arthroscopic surgery. It was like doing a tune up when you need a new motor.

It comes down to my patients being able to trust that I will do what is best for them and not be doing unnecessary surgery that can't help.

Arthroscopic surgery still has a place in the treatment of knee arthritis, but a lower place than in years past when it was over used.

Osteotomy

I can hear you asking what's that? Well, a lot of people with arthritis are bow leg or knock kneed because of the arthritis changes. If the arthritis on the other side of the joint and under the knee cap isn't severe, an operation can be done to cut the bone under the knee and realign the leg to be straight or even to tilt the other way slightly to relieve pressure on the arthritis portion of the joint.

Osteotomy isn't done nearly as much as 10 - 15 years ago so don't be surprised if you never heard of it. It requires putting metal in the bone to hold it. It does not cure the arthritis, but in some patients it is an option if they feel a total knee replacement is too drastic.

Patello-femoral Replacement

I know we have a lot of knowledgeable readers out there, but I'd be shocked if many of you have heard of this. It isn't really that new. A few patients will only have severe arthritis under the kneecap. Remainder of the knee is OK. There is a metal and plastic polyethylene prosthesis that can be inserted and only replace the worn patellar and

femoral surface. The procedure is usually done in younger patients because older people have more arthritis.

Maybe this would be a good place to stop this week. There is a lot more to discuss about surgery for knee arthritis.

Gratiot County Herald Archive and Office Website

What if I told you all the musculoskeletal information you need is in one place? It is! Log on to www.orthopodsurgeon.com and you will find -

- The office website and library
- Your Orthopaedic Connection
- Gratiot County Herald Archive of every article I have written (complete text at the click of a mouse).

It contains tons of information you or someone in your family can use.

All of the information available contains what I am treating daily in the office and hospital. I urge you to log on and check it out.

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

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

Be well.

Dr. Haverbush