Orthopaedic Connection

More About Injection Therapy

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

At the risk of everyone thinking all I do is injections (not true!), I have a few more “factoids” to share.

Joint Lubrication

Lots of patients have heard something about the lubrication substance I use to inject arthritic joints. The technique has been around for several years now.

The medical term for the treatment is “Viscosupplementation”. The product I have found most effective for my patients in the knee joint is Supartz. I inject it directly into the arthritic knee after I numb the skin and deeper knee tissue and wait 10 minutes. That makes it very comfortable for the patient. I do the injection weekly for 5 injections.

It works somewhat mysteriously, causing the patient’s own knee to make its own better lubrication, thereby relieving pain.

For how long? In most patients, 6 months or longer (a year, maybe 2).

Does it help everyone? No, but it does help a high percentage.

How does it work? No one knows for certain.

Does Dr. Haverbush wish he had discovered it? Yes!!

What About Other Joints?

Viscosupplementation currently is only FDA approved for osteoarthritis of the knee. Medicare and most insurance plans will only cover it when used in the knee.

For other joints it is considered “off label”. It can be used, but is not covered by insurance. For this reason it has not been popular for other joints in the U.S.

It has been used in the shoulder and hip joints in Europe for many years and is known to be safe and effective.

There is an important difference between the knee and shoulder and hip however. The medication must be injected into the joint space.

Injecting the knee joint space in the office is relatively easy. The shoulder and hip joints are almost impossible to inject without imaging equipment found in the hospital x-ray department. Injections in the office of the hip and shoulder are common, but these injections are given in the tissues around the joint such as the bursa.

Bottom line – if shoulder or hip joints are injected with Supartz it would be paid by the patient and done at the hospital (additional expense).

Boosting Arthroscopic Knee Surgery Outcome

Many of the patients who undergo arthroscopic knee surgery for torn cartilage are found to have arthritis changes as well. Depending on the improvement the patient derives from the arthroscopic surgery a follow up injection series of Supartz can be very beneficial if the arthritis in the knee is not allowing the recovery that was anticipated.

I have done this with very good results.

I promise not to keep talking about injections next week.
My patients put their trust in me and what I do improves the quality of their lives.

Office Website and Gratiot County Herald Archive
What if there was a whole world of musculoskeletal information at one place? There is! www.orthopodsurgeon.com opens up for you the office website, Your Orthopaedic Connection and the Archive of all previous GCH articles I have written for you, your family and friends.
Please check it out. Do yourself a favor.
Be well.

Dr. Haverbush