

# Argus Orthopaedic Zone

## Arthritis of the Knee

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

So much to cover. So little time. I don't want to explain it so superficially that you learn nothing. On the other hand I don't want to make it too technical. So I'll do my best.

Knee arthritis is very hard to define exactly because it has many faces so to speak.

My patients describe anything around or near a joint that hurts as *arthritis*. Much of the pain people experience is from tissues around a joint and this is not true arthritis.

You have true, honest to goodness arthritis of the knee when, inside the joint, the joint surface begins to undergo some wear and tear degenerative changes. Imagine a brand new tire never driven = normal. Then think of a tire driven 1,000 miles. It may look good, but it looks like there is a little bit of wear on it (earliest form of arthritis).

You get the idea. Your knee begins to wear out, but you have no clue. There is no test to check for it. In the very early stages plain x-rays don't show it. Not even an MRI will show it.

### **Then how do I know that knees do this?**

Good question. I have done thousands of knee arthroscopies over the years in patients of all ages. In a typical case I know from the MRI that the patient has a torn cartilage, but then I see the tell tale signs of early arthritis at arthroscopy that the patient and I had no idea would be there. I wish I could share these pictures with you. You can see beginning arthritis changes in the knee that may take many years to become apparent to the patient. In some people the changes can be present in their 20's, but more often in the 30's or 40's.

### **What is the cause?**

In most patients we call it primary osteoarthritis because we never know the cause. There of course is a cause, but we are unaware. Probably it is genetic and the knee is simple programmed to wear out. Secondary arthritis results from known causes such as specific injury or perhaps more often from repetitive trauma to the knee such as occurs in sports like football. Then of course there is a long list of unusual metabolic conditions that affect the smooth joint lining or tread to which I referred.

## **Diagnosis**

Seeing the very mild initial changes that occur in joints happens only by chance when I am expecting to see torn cartilage etc.

In the vast majority of cases the arthritis lurks in the knee unnoticed until the person begins to have some symptoms of aching in the knee or standing weight bearing films show the tread has started to look a tiny bit narrowed. But when these things occur the changes have probably been there for years unnoticed. If only we were able to make the diagnosis earlier we might be able to give the patient some advice about treatment.

In a real sense there are many conditions that could be helped if we only knew. Consider Ca of the colon that can be present for years as a polyp only to be discovered by blood in the stool. Colonoscopy is recommended as a routine screening device to find unsuspected polyps and tumors. So far no one has been doing screening arthroscopic surgery, because arthritis is not cancer obviously.

I hope I have started to demystify knee arthritis. There is much more to learn in future articles.

Log on to [www.orthopodsurgeon.com](http://www.orthopodsurgeon.com), my office teaching website. You can learn much more about knees and all things I treat 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