



Saying No To The Knife



Thanks to research and advanced technology, as well as concern about higher health costs, doctors are telling many patients not to undergo surgery for conditions that were once routinely treated in that way in the past.

Many different surgeries for everything from back pain to gum disease are being put under the microscope. (See "Online Orthopaedics Manifesto Regarding Arthroscopic Surgery Of The Knee For Arthritis". It is located in the Online Orthopaedics library under surgery articles.)

Doctors who used to recommend operations are telling patients to either wait or skip surgery altogether.

The move away from surgery is being driven in part by such technology as better ultrasounds, CT scans and MRI studies that let doctors monitor a patient more closely without operating on them.

An even more striking development is behind the change, in that a growing number of studies show patients who don't have surgery often fare as well, if not better, than those who do. Surgeons are aware that the major side effects and complications of surgery are often worse than the disease itself.

There is an old saying among surgeons that "*no condition is so horrible that surgery can't make it worse.*"

I have often felt that back surgery is done too frequently and too early in patients suffering from that problem. In probably 85% of patients with a back and leg pain episode, the patient will get better in one to three months. Therefore, if the patient is only given two weeks to improve and then has surgery, they may be in a group of patients being treated with surgery unnecessarily.

Healthcare insurers are also aware of this general situation as it applies to surgery and are beginning to factor this into their policies. Operations that are known to be performed too frequently are required to be preauthorized and many doctors are more willing to try alternatives to surgery if they know it will be a struggle to get reimbursed.

What used to be gospel is now known to be completely wrong in some cases. How many of you remember when children's tonsils were taken out at an early age, simply because they were somewhat enlarged. I remember vividly having



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my tonsils out and probably did not actually need it.

There are many other examples besides back surgery and arthroscopic knee surgery. Sinus surgery, tonsillectomy and hernia repair would be but a few examples. Of course, there are many ailments in which the patient does not have a choice but to be operated on. Surgery will always play a central role in the care of a trauma patient pulled from the wreckage of a car.

Bottom Line

The point, of course, is that everyone with something wrong with them does not need to have surgery. Some patients, believe it or not, are excessively anxious to have surgery when they would be able to get by without it. There are also surgeons who are very aggressive in applying their surgical skills and feel that every patient they see needs to have surgery. In surgical training it is often referred to as the mentality that you have to "cut to cure." In some cases this is absolutely true, but in many cases it is totally wrong.



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Thomas J. Haverbush, MD. P.C.

**Office Address:
315 E. Warwick Dr., Suite A
Alma, Michigan 48801
989-463-6092
Fax 989-463-8914**

**Website Address:
www.orthopodsurgeon.com**