

Your Options:

1. Have surgery to replace your knee.
2. Use other treatments, like exercise, medicines, or another type of surgery.

Key Points To Remember:

- The decision you and your doctor make depends on your age, health, and activity level, and on how much pain and disability you have.
- Most people have knee replacement only when they can no longer control arthritis pain with medicine and other treatments and when the pain really interferes with their lives.
- Rehabilitation after knee replacement requires daily exercises for several weeks.
- Most knee replacements last for at least 15 years. Some people need to have the knee replaced again.

What is osteoarthritis?

Osteoarthritis is a problem with the cartilage in joints. Over time, the cartilage breaks down until the bones, which were once separated by cartilage, rub against each other. This causes damage to tissue and bone. The symptoms include joint pain, stiffness after inactivity, and limited motion.

What is knee replacement surgery?

The surgeon covers the ends of the damaged thighbone and lower leg bone, and usually the kneecap, with artificial surfaces that are lined with metal and plastic. The artificial pieces are cemented to the bones. Rehabilitation is usually intense after surgery. Most people start to walk with a walker or crutches the day of surgery or the next day and begin physical therapy right away. Your doctor may advise you to ride a stationary bike to strengthen your leg muscles and improve how well you can bend your knee. Rehab will take several weeks. However, you should be able to start walking, climbing stairs, sitting in and getting up from chairs, and doing other daily activities within a few days.

Surgery relieves severe, disabling pain and may restore the knee's ability to work properly.

What other procedures are used to treat knee osteoarthritis?

Please feel free to ask us questions about these alternatives!

Knee injection: Knee injections involve injecting medicine directly into the joint. Time releasing cortisone, along with numbing medication, is injected into the joint to reduce inflammation, which can provide pain relief. Another type of injection for the knee is Hyaluronic Acid, a medication that helps to lubricate and cushion the knee. It does not “cure” arthritis but may provide pain relief.

Knee arthroscopy: This may be used to smooth a rough joint surface or remove loose cartilage or bone fragments. This is not usually recommended for osteoarthritis of the knee.

Osteotomy: This surgery corrects knee problems such as bowleg and knock-knee. It is usually done for younger, active people who have mild arthritis and who want to delay knee replacement.

What other treatments are available?

Medicine: If your pain is mild, you may only need pain medicines that you can buy without a prescription. Anti-inflammatory medicines may help to calm the inflammation process of the knee joint. Acetaminophen may help reduce joint pain.

Change of lifestyle: Changes may include weight loss if needed and elimination or reduction of activities that exacerbate symptoms, especially during a flare-up.

Ice or heat: Heat may help you loosen up your joints before an activity. Ice is a good pain reliever after activity or exercise.



Exercise: Exercise helps because it makes your muscles stronger, which lowers the stress on your knees. But make sure to talk to your doctor about what kind of activity is best for you.

Physical therapy: Working with a physical therapist may help guide your exercise regime and teach you specific modalities to help decrease pain and improve function.

Walking aids: These include crutches, walkers, braces, and tape. You may also reduce the stress by wearing the right shoes or by adding insoles.

Complications and Risks of Surgery

Blood clots: You are encouraged to get up and move frequently as well as take your prescription blood thinner to help prevent clotting. Symptoms of clotting include pain, swelling or redness of your calf or thigh, and shortness of breath. Call the office immediately if you develop any of these symptoms.

Infection: Infection is rare, but can occur following surgery. You are at a higher risk for infection if you have diabetes, rheumatoid arthritis, chronic liver or kidney disease, or if you are taking steroids. Symptoms include fever or chills, drainage, redness, a foul smell or increased pain at the surgical site. Call the office immediately if any of these symptoms occur.

Blood loss: It is possible that you will need a blood transfusion following surgery. Your doctor will evaluate you daily to determine if there is a need for a transfusion.

Nerve damage: As your doctor makes his knee incision, many small skin nerves will have to regenerate. Some numbness may occur on the outside of your knee incision. This numb feeling may take months to diminish, or it may be permanent.

Anesthesia complications: Respiratory failure, shock, cardiac arrest, and death are always possible during surgery. Patients with long-term kidney, heart, liver, or lung disease are at a higher risk.

What do the numbers tell us about the benefits and risks of knee replacement?

- 71-85% are satisfied with pain level 1 year after surgery
- 82% are satisfied overall 2 to 17 years after surgery
- 12% need repeat surgery within 15 years
- 1% have serious joint infection within 10 years
- Less than 1% die within 4 to 6 weeks after surgery

Based on best available evidence.

Pneumonia: Lung congestion is possible while you are recovering from surgery and are not as active. Coughing and deep breathing are encouraged to help you expand your lungs and clear any congestion.

Constipation: Bowel movements slow down with less activity and the use of pain medications. You will be encouraged to use stool softeners after you are discharged to promote regular bowel movements and prevent constipation.

Urinary tract infection: Infection to your urinary tract may occur if you have a catheter in place following surgery. Symptoms include burning and frequent urination, as well as blood in your urine. Fever and weakness may also occur. Report any of these signs to your doctor. This type of infection is a major source of joint infection and should be treated with antibiotics quickly.

Implant malfunction: There is a slight risk that the prosthesis will fail to attach to your bone causing loosening of the implant.